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OF THE FUNCTIONS AND ACTIVITIES OF HEAD NURSES IN A

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GENERAL HOSPITAL

GENERAL SERIES

MEMORANDUM Nº 5

Research Division DEPARTMENT OF NATIONAL HEALTH AND WELFARE

OTTAWA MAY 1954



CORRIGENDA

- page 41 line 2: nearly two-thirds should read over two-thirds
- page 47 footnote: pp. 105, 108-9 should read pp. 109,
- page 48 line 6: (p.112) should read (p.117)
- page 51 footnote: Appendix D-1 should read Appendix D-2
- page 62 last sentence should read, in its entirety, as follows:

 Head nurses on wards staffed entirely by graduate nurses spend more time on Education than those on wards with student nurses, but the difference is slight.
- page 63 line 8: should read b) the turnover -- (admissions plus discharges)
 as percent patient days
 (or beds occupied)
- page 64 footnote: should read lTurnover =

 Admissions + Discharges x 100
- page 64 Table 18A: last column heading should read Turnover 100 (A+D)
 Occup.Beds

and figures given should read

- 9.7, 23.2, 9.8, 9.3, 10.1, 15.5 14.9, 11.4, 17.0, 5.4, 11.8, 66.4, 15.0; T.15.8
- page 65 Table 18B: column six: 8.0 should read 8.8 last column: 2.06 should read 2.11 2.80 should read 2.90
- page 108 third line of paragraph: Table 3 (p.21) should read Table 3 (p.25)
- page 108 fourth line from bottom: time percentages should read true percentages
- page 109 footnote 2: delete (Snedecor's F test)
- page 139 Table F-22: last column: Mean 2.01 should read 2.19 2.19 should read 2.01

PLEASE AMEND YOUR COPY ACCORDINGLY

CAI HW56-54605

A STUDY OF

THE FUNCTIONS AND ACTIVITIES OF HEAD NURSES

IN A GENERAL HOSPITAL

Planned and conducted by
The Research Division, Department of National Health and Welfare

at the request of The Canadian Nurses' Association

and with the co-operation of The Ottawa Civic Hospital

Published by the authority of the Honourable Paul Martin Minister of National Health and Welfare



FOREWORD

This study of the Activities of the Head Nurse in a large general hospital was carried out by the Research Division at the request of the Canadian Nurses' Association.

The study, which is one of a series sponsored by the Association covering different aspects of nursing, was designed to be more than a job analysis; in it an attempt was made to carry out a detailed investigation of the activities of the nurse in charge of a ward as they are related to her working environment. While the study itself is similar in many respects to others carried out in the United Kingdom and in the United States, both its scope and the methodology employed will be of considerable interest to students of nursing problems and of the principles of job analysis.

Persons interested in the problem of making the most effective utilization of existing nursing personnel will note with concern the evidence disclosed, in this as in other studies, of the fragmented nature of the duties performed by the Head Nurse. The extremely short duration of each activity⁽¹⁾ in which she engages, generally less than half a minute, would appear to give some strength to the assertion that she is not so much in control of her job as controlled by it.

7.54

⁽¹⁾ In the survey, the duration of an activity is measured by the period of attention devoted to a particular ward situation at one time, not to the total period required to deal with it.

It was found that the Head Nurses whose duties were studied were involved in all aspects of ward administration. The picture is one of short-term participation at all levels and in all types of activity, with the data suggesting that in the particular hospital studied possibly as much as 40 per cent of the work carried on by the Head Nurse might be delegated to subordinates. While the situation would differ somewhat in hospitals of a different size and with a different organizational pattern, there would appear to be considerable need for further detailed studies of nursing functions in individual hospitals, on which to base planning for segregation of those functions which can be delegated, for determining those persons to whom they can be delegated, and for ensuring that delegation is accompanied by adequate safeguards. It is hoped that this report will assist in the planning of methods of approach to possible and practical solutions to these problems.

A number of persons contributed to the study, which was greatly assisted by the aid and full co-operation extended by Dr. W. Douglas Piercey, the Superintendent of the Ottawa Civil Hospital in which it was carried out. Miss Edith Young, Director of Nursing at the Hospital, in addition to ensuring that all facilities and information required were made available to the study team, provided invaluable assistance in planning and carrying out the study. Miss Nettie D. Fidler, Chairman of the Committee on Nursing Care of the Canadian Nurses' Association, and Miss Dorothy Percy, Nursing Consultant to the Department, who served with Miss Young as advisors, supplied constant aid and helpful advice.

The study was carried out under the direction of Mr. Gordon H. Josie, Supervisor of the Methods and Analysis Section of the Research Division, who also prepared this report. Mr. Josie was assisted in the planning and carrying out of the study by Mrs. Marion Botsford, Assistant Registrar of the Registered Nurses' Association of British Columbia, and Mr. Charles B. Walker of the Research Division. Mrs. J.G. Thomson and Mrs. J. Edgar of the nursing staff of the Ottawa Civic Hospital acted with Mrs. Botsford and Mr. Walker as observers.

Finally, a special word of appreciation is due to the Head Nurses who allowed themselves to be watched, stop-watched and their activities to be minutely analyzed during busy working hours. Without their help the study would not have been possible; their good humoured and constant co-operation contributed greatly to the pleasure of carrying it out.

Joseph W. Willard, Director, Research Division.



REPORT ON

A STUDY OF THE FUNCTIONS AND ACTIVITIES OF HEAD NURSES

IN A GENERAL HOSPITAL

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I. INTRODUCTION

1. Origin

The Canadian Nurses' Association has for many years been interested in research into various problems affecting their profession. In 1929 the Association joined with the Canadian Medical Association in "A Survey of Nursing Education in Canada". Again in 1948 the Association, with financial assistance from the Canadian Red Cross Society, undertook the organization of a Demonstration School of Nursing. The C.N.A. also co-operated in surveys of nursing carried out in connection with the provincial health surveys under the National Health Grants Program in 1949 and 1950.

In 1951 the Association decided to prepare an integrated program for research in nursing. This plan included three major areas of study:

- a) the organization of the profession of nursing;
- b) the functions of nurses in hospitals, public health work, and private duty;
- c) the education of nurses for these functions.

To initiate this program the C.N.A. proposed three specific research projects, one in each of these areas: a structure study of the Association itself; a study of head nurse functions and activities; and an evaluation of the Demonstration School of Nursing at Windsor, Ontario.

The Association found itself inadequately equipped, technically and financially, to carry out all these studies and also wished to have the benefit of independent research. It decided to call on outside assistance, and the Department of National Health and Welfare was asked to undertake the second project -- the Study of Head Nurse Functions.

The Department was in accord with the view that the prevailing shortage of nurses warranted investigation of the most effective use of available nursing resources. It was recognized too that the stimulation of hospital construction by the National Health Grant Program tended to augment the demand for nurses.

More than half of employed graduate nurses are in hospitals and the proportion is increasing. It therefore seemed reasonable and expedient to initiate a study of nurse functions with a pilot project in a hospital. As the head nurse is recognized as a key-person in the hospital service, it was appropriate to start with the investigation of head nurse functions.

In the light of these considerations, the Department of
National Health and Welfare undertook to carry out this specific project
proposed by the Canadian Nurses' Association.

2. Purpose

This Study was therefore planned to obtain detailed information about the functions and activities of head nurses in a general hospital. Such information is essential in planning efficiently for the most effective use of limited nurse resources, and for improvement in

- D -

nursing service through such measures as re-allocation of functions among members of the hospital staff. To this end, the Study should answer such questions as:

- a) What does the head nurse do?
- b) How frequently does she carry out various activities?
- c) What proportion of her time is spent in activities of various types?
- d) Is she performing any duties of which she could be relieved?

The Study was also intended to be a pilot project in the sense of developing and demonstrating a suitable methodology for the investigation of nursing functions in a hospital.

3. Organization

The Head Murse Study was a co-operative enterprise of the Caradian Murses' Association, the Ottawa Civic Hospital, and the Department of National Health and Welfare. The Study has been carried out by the Research Division of the Department. A Planning Committee, made up of the nursing consultants to the program and the Director and members of the Research Division staff, provided guidance and advisory services during the course of the Study which was carried out under the direction of Gordon H. Josie, Supervisor of the Research Nothods and Analysis Section of the Division, assisted by Charles B. Walker of the Division and Mrs. Marion Botsford*, who also acted as liaison between the hospital

^{*} Mrs. Botsford, Assistant Registrar of the Registered Nurses' Association of British Columbia, was engaged by the Research Division as Nursing Research Assistant for a period of three months.

and Department as well as providing advice and assistance on technical details of nursing practice.

Nursing Consultants for the Study were Miss Nettie D. Fidler, Chairman, C.N.A. Committee on Provision of Nursing Care, Miss Edith Young, Director of Nursing at the Ottawa Civic Hospital, and Miss Dorothy Percy, Nursing Consultant of the Department of National Health and Welfare.

Association because it is a large general hospital, conveniently located and generally suitable for the Study, and particularly since Dr. W. Douglas Piercey, the Superintendent, and Miss Edith Young, Director of Nursing, were interested in the project and willing to co-operate. The Hospital also made it possible for Mrs. J. G. Thomson and Mrs. J. Edgar of the nursing administration staff to serve as observers. Basic data respecting the Ottawa Civic Hospital, the locale of the Study, are given in Appendix A.

It must be emphasized that this Study is not a critical assessment of the nursing service of the Ottawa Civic Hospital. This Hospital was selected for the reasons given above in an attempt to get a picture of head nurse activities in a reasonably representative large Canadian general hospital. As indicated in Appendix A, this Hospital is not atypical in general characteristics and work load. Any observations and recommendations based on the results are of value chiefly to the extent that they may be applied generally and are not restricted by peculiarities of the Ottawa Civil Hospital situation.

II. PLAN AND METHODOLOGY

1. Introduction - Other Studies

In proceeding from the general terms of reference to a detailed plan for the study, the Research Division undertook a review of the literature in this field (see Appendix B - Bibliography). Particular mention should be made of the U.S. Public Health Service study of head nurse activities in the Massachusetts General Hospital, the Nuffield job-analysis of the work of nurses in hospital wards, and "A Functional Analysis of the Nursing Service Team" by Viola Constance Bredenberg. Preliminary reports of the first two of these studies were available but the final reports were not issued until this Study was essentially completed. In the Massachusetts General Hospital investigation emphasis was on the time factor; the Nuffield Study was much more comprehensive than the one planned here; and the Bredenberg project was directed to a comparative study of two methods of providing nursing service. These studies and others were found to be informative and suggestive, but the procedures were not directly applicable to, or adequate for, the present investigation.

2. Design of the Study

What Was To Be Observed and Measured

In view of the purpose of this investigation, it was clear that a time and motion study would not be appropriate, but rather, in this project activity was to be considered as <u>purposive action of a specified nature</u>. Further, the type of activity must be considered and described in objective but functional terms which would include reference to related significant factors, particularly:-

Place -- where the activity occurred; so that it would be possible to say, for example, whether the head nurse was generally at her desk or out in the ward most of the time.

<u>Contacts</u> -- persons with whom she was carrying on the activity; for example, how much of her time was spent with others in contrast to time spent alone.

Equipment and Supplies -- to what extent is the head nurse involved in dealing with equipment and supplies of various kinds; particularly, "Does 'paper work' take much of her time?"

In addition to a description of the activity and these related factors, it was necessary to determine accurately the <u>frequency</u> of activities, both absolute and relative. We wanted to know how many times a specific activity occurred; which activities were the most frequent, and so on. Finally, we were concerned with the <u>duration</u> of the activity. Accurate timing of the observed activities was essential if we were to be able to answer the questions posed.

Where, When and by Whom were Activities to be Observed

The subject of the Study, the head nurse, and the locale, the Ottawa Civic Hospital, were settled in the general terms of reference for the investigation. Preliminary review of the literature and consideration of the problem established the nature of the observations and measurements, as indicated above. There were still to be settled the questions: Which wards were to be observed? When were observations to be made and who were to be the observers?

In order to make this Study as comprehensive and representative as possible, all head nurses in the hospital should be observed. An exception might be made of those head nurses in charge of maternity wards, operating rooms, and the out-patient department, as they have specialized functions. The research group agreed with the suggestion of the Director of Nursing at the Ottawa Civic Hospital that observations should be taken in the fall, after the school of nursing began its term. It was further decided that all of the normal 12-hour hospital day should be represented as well as each day of the week from Monday to Friday, inclusive.

Competent observers were essential and fortunately four suitable persons were available. Two of these, Mrs. Edgar and Mrs. Thomson, were senior nurses on the administration staff of the hospital; one, Mrs. Botsford, was the nursing research assistant engaged specifically for the Study; and the fourth observer, Mr. Walker, was a member of the research staff of the Department. These four were all able to make accurate and objective observation records after a brief training period. As this was a pilot project, there was some advantage in having a diversity among the observer group. Because of greater possibility of bias it was considered inadvisable to have the head nurses themselves make the observations. In any case, this could not be done without undue interference with the hospital nursing arrangements.

The question of the length of the observation period was a matter of some special enquiry, since it depended on the convenience of the hospital, the numbers of observers available, and the time considered necessary to get an adequate picture of the head nurse's activities.

After a trial it was apparent that more than one or two consecutive hours of observation would cause undue fatigue or inconvenience to the observers or head nurses. One-hour observation periods rather than longer intervals would permit the observations to be spread over a greater length of time and the smaller sampling unit makes for greater accuracy and a more representative sample.

The was found that eight one-hour periods could be arranged to cover adequately the twelve hours of the hospital day (7.00 A.M. to 7.00 P.M.) This not only resulted in a saving of observation time but made it practical to have a number of observations on the same day or even in sequence, since 15 minutes or more were free between periods. The periods were as follows:

1: 7.00 -- 8.00 A.M. or 7.30-8.30 A.M.

2: 9.00 -10.00 A.M.

3: 10.15 -11.15 A.M.

4: 11.30 A.M. - 12.30 P.M.

5: 1.30 - 2.30 P.M.

6: 3.00 - 4.00 P.M.

7: 4.30 - 5.30 P.M.

8: 6.00 - 7.00 P.M.

Schedule for Observations

A schedule of observations was drawn up to cover 120 observation hours randomly distributed over a ten-day period, Monday to Friday of two successive weeks. This represented a 10% sample of the total of 1200 possible observation hours, (eight one-hour periods per day for each of the fifteen head nurses during the full ten-day period). This schedule is shown in Figure 1, and a copy of the information and instructions for Observers and Head Nurses and other explanatory notes are included in Appendix C.

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ers: A,B,C,D s: 1-8 (see n.8)	Frida	3 4 5				C	p p			4	p			the contraction of the contracti	-	Z					0	4	A (1	+		0							
Observers Periods:	Thursday	12345678	B D		m	C)	-	-		Q	Q	A				-		en en de la companya			A				m m				Щ	, A	A		m D
OBSERVATION SCHEDULE	Wednesday	12345678		A				А		A B		0	A		A					0		А	4	9			O		A 0		BG		
1951	Tuesday	12345678	0		A	ф	C	B	Ω	A		A			Щ		A	22-26. 1951			Ф	A		A A	D		D A	Д	Ü	А	A	B B	
First Week, October 15-19,	Monday	12345678	AB	A C	А		O	D			D		М	υ			Q	Second Week, October		M	D			Ф	p		A	D		A	D	A D	
Figure 1	Head Murse	Location No.	1 East 1	1 West 2	1 West 3	2 East 4	2 Centre 5	2 West 6	4 West IL 7	4 West S. 8	4 East 9	5 East 10	5 West 11	Vets "A" 12	"B"	Vets "C" 14	Vets "D" 15		1 East 1	1 West 2	1 West 3	2 East 4	2 Centre 5	2 West 6	4 West N. 7	4 Wests. 8	4 East 9	5 East 10	5 West 11	Vets "A" 12	"B"	101	Vets "D" 15

OBSERVATION SCHEDULE

The schedule was designed to meet the following specifications to ensure adequate coverage of head nurses' activities throughout the 12 hours of the hospital day:

- a) each head nurse to be observed for eight one-hour periods;
- b) the eight periods for each head nurse to cover a full twelve-hour hospital day;
- c) each head nurse to be observed by each of the four observers for two periods;
- d) the observation periods to be distributed randomly (within the above restrictions) throughout the two-week period.

The observation periods to be distributed so that there will be:

- a) a maximum of three observation periods in a day for any head nurse:
- b) a maximum of five observation periods in a day for an observer.

Activity Record

A form was designed to permit of the ready and accurate record of timed observations of activities and the related factors; see Figure 2. It will be noted that the Activity Record provides for the activity observed, the place it occurred, and persons, equipment and procedures involved as well as the topic of any relevant conversation. The date, period of the day, ward, person observed, and observer were also recorded. The individual record sheet covers a period of ten minutes. The complete one-hour record required six of these sheets. It was found quite feasible, after a suitable trial, to record the duration of activities to the nearest quarter-minute. The starting time only for each activity was recorded opposite the nearest 15-second mark on the sheet. The duration of an activity was the clapsed time in 15-second intervals between the starting times for two consecutive activities. Timing was done by

HEAD NURSE STUDY ACTIVITY RECORD FORM

DATE	WARD	HEAD	NURSE	OBSVR
dark hade dark	112 11 112		TICTION	OTIO ATT
		1	100	And in contrast of the latest and th

TIME	PLACE	ACTIVITY	PERSON	EQUIPMENT & PROCEDURE	TOPIC OF CONVERSATION
0.00					
0.15					
0.30					
0.30					
1.00					
1.15					
1.30					
1.45					
2.00					·
2.15					
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-8.30					
8.45					
9.00 9.15 9.30 9.45					
9.15			-		
9.30					
9.45					

Actual sheet - $8\frac{1}{2}$ x 14 inches - lines double spaced on typewriter.

stop-watch. The observers followed the head nurses closely enough to be aware of all activities and generally the content of conversations.

Occasionally, where necessary, further details were obtained by direct questioning of the head nurse. The head nurse was, of course, aware of being observed.

Abbreviations were used in the record but there was no coding of activities at the observation stage. The aim was to make the activity record as complete, accurate and unbiased as possible. A sample of an actual Activity Record is given in Figure 3.

HEAD NURSE STUDY - ACTIVITY RECORD

DATE O	october 2	22 WARD C	,	HEAD NURSE Mr	s. H. OBSVR A.
TIME*	PLACE	ACTIVITY	PERSON	EQUIPMENT & PROCEDURE	TOPIC OF CONVERSATION
5.00	С	asks	Ord.		Are you going to main Bldg? No.
5.15	M C	gives tells	11	chart	Take to Dr. F.
5.30	11	11	Ord.2		Put cap on - O R Stockings too
5.45	C	xxx			
6.00	C	xxx			
6.15	D	writes asks		Req.for supply (re cards)	What doing with that? wax cards.
6.30	C D	Q & A receives	Ord	chart	Did you send for this? Yes.
6.45	11	checks		chart (old chart)	
7.00	11	reads, checks		ft .	
7.15	11	81 83		11	
7.30	11	11 11		11	
7.45	11	11		Ħ	
8.00	tı	tells	A.H.N.		Mr. E. was in 1939 with poss. gastric ulcer
8.15	11	puts(away) ର & A	11	chart	Under Dr. D & Dr.R? Yes
8.30	11	11 11		11	
8,45	WCD	tells and gives	W C	X Ray slip	Send those 2 men as soon as ord. free
9.00	11	Q & A	A.H.N.		Orderly? I told them - are taking now
9.15	мс	gets		Kardex Card	
9.30	D	checks		11	
9.45	91	writes & puts away		Ħ	

^{*} This extract covers the 5 minutes from 11.10 to 11.15 A.M.

3. Procedure for Analysis

Classifications and Codes

For purposes of analysis of the data it was necessary to prepare suitable classification and code systems for the activities, places, persons and equipment involved in the activities observed. The latter three classifications and codes were relatively simple; they involved grouping of persons, for example, into medical staff, nursing administration, nursing service and similar categories, and the preparation of corresponding two-digit codes. (See Appendix C-2, 3, 4.)

The classification and coding of the functions and activities of head nurses proved to be a major undertaking but one of the most interesting and valuable features of the Study. While there was no classification and code for head nurse functions and activities adequate for our purpose, we did make use of the list of nursing activities in the Johns and Pfefferkorn book "An Activity Analysis of Nursing" and the system used by the U.S. Public Health Service in the Head Nurse Study in the Massachusetts General Hospital; also other authoritative statements about nursing functions and activities, particularly that in the Hospital Nursing Service Manual.

The new detailed and comprehensive classification and code we devised has divided the functions and activities carried on by the head nurse into three main areas:

- a) patient care
- b) ward administration and housekeeping (non-nursing)
- c) personnel administration

In each of these three areas the activities were classified into five levels of function:

- i) Management
- ii) Education or Teaching

 $\frac{M-945}{7.54}$

- iii) Supervision
- iv) Direction
 - v) Execution

It was found that activities to be classed as Supervision or Direction could in all cases be represented by a simple designation of one of the activities under Education or Execution, generally the latter. The suffix S or D was added to the code number to indicate supervision or direction, respectively.* The actual activities listed under the headings in each of the three areas resulted in a system of about 250 specific functions or activities of the head nurse. The full classification and code is included in Appendix E. The number of items of the code corresponding to specific activities is shown by area and level in the table below and in greater detail in Appendix E.

The full potentialities of the classification system are evident in the tables and discussion of the results of the Study in Part III of this Report. It will be noted that the code is arranged so that the letter and three-digit number for an activity indicates the area of activity by the letter P, H or S, and the level of activity by the hundreds digits. The tens-digits indicate activities having a more or less common purpose; these might be described as "functions". The units digit identifies the specific activity.

Number of Activity Code Items (Specific Activity Types) By Area and Level

^	Are	Area of Activity						
Level of Activity	Patient	Ward	Personnel	Total				
	Care	Administration	Administration					
	P	II	S					
Management (100-199)	74	10	8	30				
Education (400-499)	12	2	8	22				
Execution (500-699)	112	55	33	200				
Total	338	67	49	254				

^{*} Eg., P.532S supervising the administering of drugs and medications (Table 7A & B).

Coding and Tabulation

The coding of the activity and related factors according to the system described above was done directly on the activity record shects. The activity classification is quite complex and required familiarity with the code and the nature of the records; one person, Mr. Walker, coded all the records. This operation involved, of course, consultations and decisions regarding the appropriate designation for activities described in the notes on the activity records. Any difficulties were usually resolved quite readily but the initial trial coding period enabled us to develop the classification mainly by way of adding items or improving the specification of the activities. The classification and code was, therefore, amended in the light of the actual recorded information, but no fundamental change in the system was necessary. The actual records were completely coded according to the final version of the classification. The coding was checked for consistency by reviewing and comparing activity descriptions which had been given the same code number. This was particularly necessary since a considerable period was required for the coding process.

In view of the number of activities recorded and the number of factors involved, it was evident that a card system would be required for the analysis. The numbers, however, did not seem to warrant use of automatic punch card equipment. Ordinary cards might have been used for hand sorting. But the use of marginally-punched cards had considerable advantages for our purposes since they were easily punched with simple equipment, were relatively inexpensive, and provided a complete code record for checking and comparison with the observation record.

A marginally punched keysort card (McBee Company) was designed for the purpose. A completed card using one of the activities from the record in Figure 3 is shown in Figure 4. The codes used in preparing the cards are given in Appendix C with certain explanatory notes.

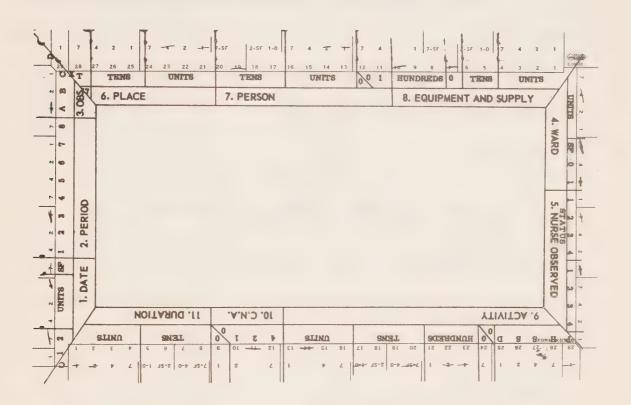


Figure 4. Completed Activity Record Card

In the activity represented by this card (Fig.4) the Head Nurse (by A) herself (2-1) is being observed giving information about the patient (P.682) to a member of the nursing staff, the Assistant Head Nurse (43). She got the information from a chart (200). This activity took place at the chart desk (5) in Ward 14 and lasted 3 intervals on October 22 (1st day of 2nd week), in period 3 (at 11.13 A.M.). That C.N.A. regarded this as a Head Nurse function is indicated by code number 2 in section 10 of the card.

Tabulations

After the activity record (keysort) cards were coded and punched, they were sorted by activity code number and then by frequency, by ward, by observer, and other variables. By using large master tabulation sheets, the number of major sorts and counts was kept to a minimum and most of the final tables (Part III) were prepared from these master sheets.

The nature of the tabulations will be evident from the tables given below but in the following master tabulations a count was made in each case of both activities (number of record cards) and time involved (duration):

- i) activities and time by complete classification versus duration (1,2,3,.... intervals)
- ii) activities and time for the complete activity classification versus head nurses (Nos. 1 to 15)
- iii) activities and time for the complete activity classification versus observer (Λ, B, C, D)
- iv) activities and time for activity groups versus status of nurse observed
 - v) activities and time for activity groups versus period of the day

In addition, tabulations were made for activities and time in relation to locations (places), contacts (persons), and forms, equipment and supplies involved.

III. ANALYSIS OF THE DATA -- RESULTS

It is proposed to comment first on the frequency and duration of the activities and then to discuss the nature of the observed activities in terms of the classification and code, that is, according to area, level, and specific types. Then the related factors - places, contacts, equipment and procedures involved will be considered. Following this, attention will be directed to any differences associated with the time of the day and with ward characteristics. Finally, we shall consider the results in the light of the Canadian Nurses' Association designation of functions appropriate to head nurses.

1. Frequency and Duration of Activities

Activities were timed to the nearest quarter-minute so that in the 120 hours of observation there were 28,800 intervals of 15 seconds duration. As indicated in Table 1, a total of 14,028 activities were observed in this time. Thus we have the impressive fact that head nurses are engaged in activities which are on the average of only one-half minute duration. The median, another form of average, was 0.86 interval; this means that half the activities were less than one-quarter minute in duration.

Table 1

Number and Average Duration of Activities

Total observation time	28,800 intervals (120 hours)
Total number of activities observed	14,028
Average duration of activity	Mean 2.05 £ 0.030* intervals
Interval = 15 seconds	

^{*} Standard Error 0.030 intervals. See Appendix D.

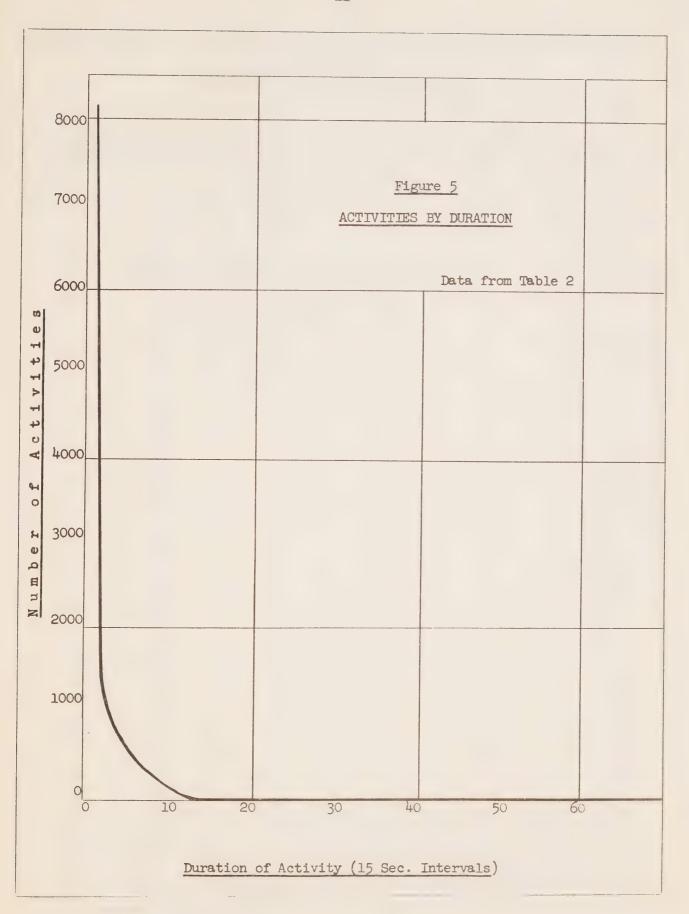
To appreciate the significance of these average figures it is helpful to examine the distribution of all activities by duration. This is shown in a simple graph, Figure 5. In contrast to the "normal" frequency distribution, with most of the individuals grouped in the middle of the range and few having extreme values, the distribution of head nurse activities is characterized by the very great number of short duration; this J-shaped distribution falls off very abruptly so that even relatively short durations, such as a few minutes, are quite rare.

Expressed another way, about one-half of the total time was occupied in activities-each lasting about two intervals, \frac{1}{2}-minute or less. The distribution of time cumulatively by duration of activity to indicate this is shown in Figure 6. Data for Figures 5 and 6 are given in Table 2. Over 93% of the activities lasted one minute (four intervals) or less and these accounted for 70% of the total time. Activities taking a considerable period of time, say five minutes (20 intervals) or more, are relatively infrequent representing only 51 of the 14,028 activities. They account for about 5% of the total time.

The head nurses may have been carrying on at a particularly high level of activity while being observed. Some of the observers had this impression and some head nurses themselves considered this to be so.*

This evidently implies that the head nurse's idea of being busy is to be very active. However, the consistently low average duration throughout the two weeks of random observation periods, the nature of the frequency distribution, and the paucity of activities lasting more than one minute

[&]quot;The Impact on the Höspital", Edith Young. The Canadian Nurse, Vol.48, No.12, December, 1952. p.980.



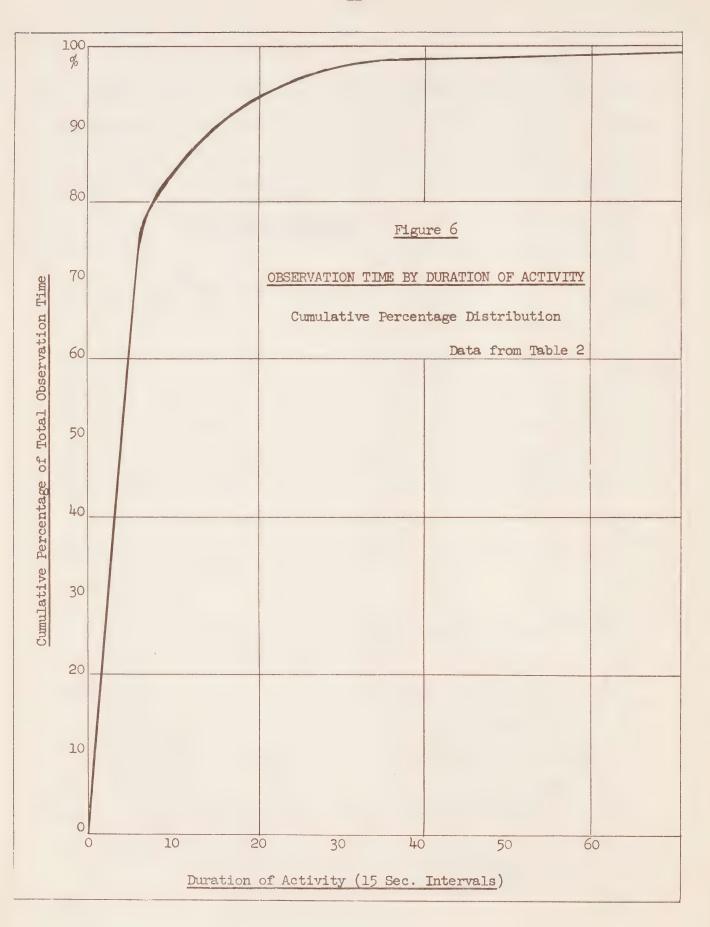


Table 2
Distribution of Activities by Duration

D 11 77	ation	A a +	4 4 4	3			
	Intervals	No.	ivit	Cum. %	Total	Time %	Cum. %
1	1 2 3 4 5 6 7 8 9	8,180 3,149 1,165 568 307 175	58.31 22.45 8.30 4.05 2.19 1.25	58.31 80.76 89.06 93.11 95.30 96.55	8,180 6,298 3,495 2,272 1,535 1,050	28.40 21.87 12.14 7.89 5.33 3.65	28.40 50.27 62.40 70.29 75.62 79.27
2	7 8 9 10	121 73 66 44	0.86 0.52 0.47 0.31	97.41 97.93 98.40 98.72	847 584 594 440	2.94 2.03 2.06 1.53	82.21 84.23 86.30 87.82
3	12 13 14	30 25 21 13	0.21 0.18 0.15 0.09	98.93 99.11 99.26 99.35	330 300 273 182	1.15 1.04 0.95 0.63	88.97 90.01 90.96 91.59
4	15 16 17 18	11 8 7 9	0.08 0.06 0.05 0.06	99.43 99.49 99.54 99.60	165 128 119 162	0.57 0.44 0.41 0.56	92.17 92.61 93.02 93.59
5	19 20 21 22	5 10 6	0.04 0.07 0.04 0.04	99.64 99.71 99.75 99.79	95 200 126 132	0.33 0.69 0.44 0.46	93.92 94.61 95.05 95.51
6	23 24 25 26	2 1 4 2	0.01 0.03 0.01	99.81 99.81 99.84 99.86 99.87	100 52 54	0.16 0.08 0.35 0.18	95.67 96.75 96.10 96.28 96.46
7	27 28 29 30 31	2 2 1 1 2	0.01 0.01 0.01 0.01	99.89 99.89 99.90 99.91	56 29 30 62	0.19 0.19 0.10 0.10 0.22	96.66 96.76 96.86 97.08
8	32 33 34	3	0.02	99.94	0 99 0	0.34	97.42
9	35 36 37 38	1 2 1 0	0.01	99.94 99.96 99.96	35 72 37 0	0.12 0.25 0.13	97.54 97.79 97.92
10 11 17 52 60	37 38 39 40 43 67 208 240	1 1 1 1	0.01 0.01 0.01 0.01 0.01	99.97 - 99.98 99.99 99.99	39 - 43 67 208 240	0.14 0.15 0.23 0.72 0.83	98.06 98.21 98.44 99.16 99.99
	Total	14,028		100.00	28,800	1.00.00	100.00

suggests that any adjustment in this connection would be of minor importance. In fact, the findings in this study corroborate and throw further light on the observations in the U.S. P.H.S. Report "Head Nurse Activities In A General Hospital" 1 regarding the tendency to perform some major activities in a "piecemeal" fashion. This study reported many major activities discontinued after less than one-half minute. The importance of this extremely low average duration of activity can hardly be over-emphasized when we know that the head nurse is expected to be "one who is responsible for the direct management and supervision of a single unit". 2

It must be pointed out that the restricted range of the average duration of activities found throughout the analysis seriously limits, for practical purposes, comparison of activities in terms of mean duration. Our discussion must generally be based on the relative proportions of time involved in various activities or groups of them, rather than direct comparison of mean durations.

U.S. Public Wealth Monograph No.3. Superintendent of Documents, Washington, D.C. p.10,15.

Hospital Organization and Management, Malcolm T. MacEachern. Chicago. 1947. r.423.

2. Nature of the Activities

Areas of Activity

The classification system permits of the description of the activities in various ways, including area, level, and specific kind of activity. The major areas are Patient Care (P), Ward Administration (H), and Personnel Administration (S). The frequency and duration of activities in these three areas are shown in Table 3. The distribution of activities and time is also indicated in Figs. 7 and 8.

Table 3

Number and Duration of Activities by Major Areas

No ion Amo	Activi	\$ 1.20	Duration			
Major Area	No		Total	B	Mean	n
P - Patient Care H - Ward Admin. S - Personnel Admin. Other	10,448 2,045 1,310 225 14,028	74.5 14.6 9.3 1.6 100.0	21,858 3,635 3,040 267 28,830	75.9 12.6 10.6 0.9	2.00 / 1.78 / 2.32 / 1.19 / 2.05	.023 .038 .256 .040

About three-quarters of the time of the head nurses was spent in activities concerned with Patient Care. Such activities were 75% of the total number. Ward Administration, involving housekeeping and other non-nursing duties, was next in importance with about 15% of activities and 13% of time. The third area, Personnel Administration, accounted for about 10% of activities and time. The remainder, less than 2% of activities and 1% of time, was taken up with personal affairs and unallocated actions such as time in transit.

Activities in all areas were of consistently short duration.

The average again was about one-half minute and there was no practical difference between the areas in this respect. The frequency distribution

Figure 7.

ACTIVITIES BY AREA

Percent Distribution

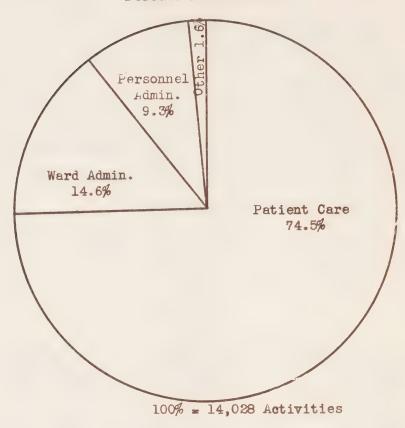
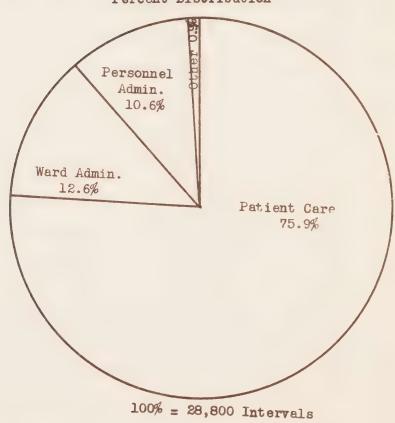


Figure 8.

ACTIVITY TIME BY AREA

Percent Distribution



Head Nurse Study: Data from Table 3.

by intervals for each area is similar in form to that given in Table 2 and accompanying graphs, and need not be repeated in this instance.

Levels of Activity

In addition to the division of activities by major area, they have also been classified according to "level" of function. The distribution of all the activities by level is given in Table 4, and Figures 9 and 10.

Table 4

Number and Duration of Activities by Levels

Level of Activity	Activities No. %		Duration Total Time % Mean			
100 Management S Supervision D Direction 400 Education Execution 500 Direct 600 Admin. & Clerical Other 200 In-transit 300 Personal	883 2,431 966 366 (9,157) 4,052 5,105 (225) 219 6	6.3 17.3 6.9 2.6 (65.3) 28.9 36.4 (1.6) 1.6	2,326 4,773 1,336 1,289 (18,809) 7,992 10,817 (267) 246 21	8.1 16.6 4.6 4.5 (65.3) 27.7 37.6 (0.9)	2.63 / 1.96 / 1.38 / 3.52 / (2.05 / 1.97 / 2.12 / (1.19 / 1.12 / 3.50 /	.118 .044 .025 .864 .026) .038 .035 .040) .265
Total	14,028	100.0	28,800	100.0	2.05 🛓	.030

Management, Supervision, and Direction are functions consistent with the idea of a head nurse as the administrator of a nursing unit.

About 30% of the observed time was spent in activities of this kind.

Supervision was the most common of these functions. Execution or direct activities, which are not so evidently those of an administrator, accounted for nearly two-thirds (65%) of the total time. Education or teaching activities required less than 5%.

The distribution of activities and time is further examined in Table 5.

M-945 7.54



ACTIVITIES BY LEVEL

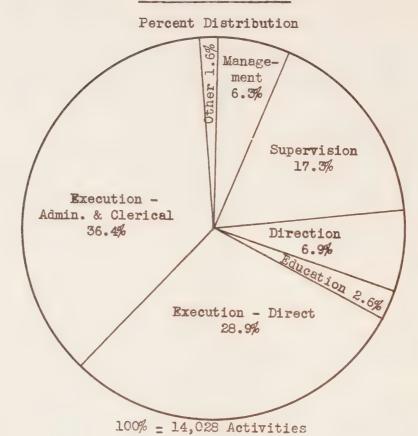


Figure 10.

ACTIVITY TIME BY LEVEL

Percent Distribution

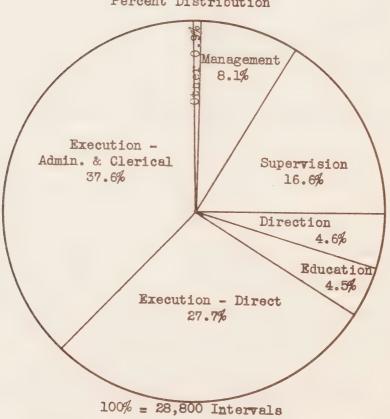


Table 5

Distribution of Activities by Level in Major Areas

A. Number of Activities

Level	Patient Care P	Ward Admin. H	Personnel Admin.	Total
100 Management S Supervision D Direction 400 Education Execution	669	155	57	881
	2,083	309	37	2,429
	745	208	17	970
	296	-	70	366
500 Direct	2,362	1,048	642	4,052
600 Admin. & Clerical	4,293	325	487	5,105
Total	10,448	2,045	1,310	14,028*

B. Duration of Activities (Intervals)

Level	Patient Care P	Ward Admin. H	Personnel Admin.	Total
100 Management S Supervision D Direction 400 Education Execution	1,813 4,144 1,025 614	317 564 291	189 68 24 675	2,319 4,776 1,340 1,289
500 Direct 600 Admin. & Clerical Total	4,939 9,323 21,858	1,871 592 3,635	1,182 902 3,040	7,992 10,817 28,800*

C. Percent Distribution of Total Time

Level	Patient Care P	Ward Admin. H	Personnel Admin. S	Total
100 Management S Supervision D Direction 400 Education Execution	6.30 14.39 3.56 2.13	1.10 1.96 1.01	0.66 0.24 0.08 2.34	8.05 16.58 4.65 4.48
500 Direct 600 Admin. & Clerical	17.15 32.37	6.50 2.06	4.10 3.13	27.75 37.56
Total	75.90	12.62	10.56	100.00*

D. Percent Distribution of Time Within Areas

Level	Patient Care P	Ward Admin. H	Personnel Admin. S	Total
100 Management S Supervision D Direction 400 Education Execution 500 Direct	8.29 18.96 4.69 2.81	8.72 15.52 8.01	6.22 2.24 0.79 22.20	8.05 16.58 4.65 4.48
600 Admin. & Clerical	42.65	16.29	29.67	37.56
Total	100.00	100.01	100.00	100.00*

^{*} Includes "other" activities; 225 activities, duration 267 intervals.

The assessment of head nurse activities seems to revolve largely around the relationship of the combined Management-Supervision-Direction group to the Execution activities. Can the latter be reduced to allow more time for the Management and related activities? In order to answer this question, we must take a closer look at the data. In Table 5 we can compare the level of activity within the areas. The bulk of the Management-Supervision-Direction is in the Patient Care area. These activities in Ward and Personnel Administration amounted to only about 5% of the total time. The largest amount of Execution time is also in the Patient Care area. Specifically, the head nurse spent about one-third of the total time in carrying on herself, administrative and clerical activities concerning Patient Care. In the other areas, administrative and clerical activities are not as important as direct Execution functions.

Major Groups and Specific Activities

The groups of closely related activities, identified by the tens digits in the code, provide convenient and informative categories. None of the groups are very outstanding but those accounting for 1% or more of the total time are listed in Table 6.* These 25 groups together took up nearly three-quarters of the total observation time. Leading groups are seen to be those concerned with giving, receiving and recording information about patients; writing orders and making arrangements for services outside the unit; and observing and recognizing symptoms, conditions and causes. Patient Care activities predominate.

That there was a great diversity of activity is also indicated by enumeration of the specific activities, those identified by individual

^{*} The full classification of activities is given in Appendix E.

Table 6

Major Activity Groups*

Rank	1 /1-2-				me
		Description	No.	No.	75
	No.		ivities		Total Time
1	P.680-9	Giving information re patient	799	2,189	7.60
2	P.660-9	Writing orders and making arrangements re	60-		
2	D 500 0	services involving persons not on unit staff.	685	1,852	6.43
3	P.500-9	Observing and recognizing symptoms, conditions	01.3	2 (55	
4	P.630-9	and causes	941	1,655	5.75
5	P.610-9	Recording information re patient	678 888	1,614	5.60
6	P.510-9	Receiving information re patient	000	1,546	5.37
	1.710-9	giving treatments and making diagnostic tests	253	1,014	3.52
7	P.560-9	Direct care for patient's well-being	491	907	3.15
	H.520-9	Securing, maintaining, storing and distributing		901	2.17
		supplies and equipment	549	896	3.11
9	P.530-98	Supervising the preparing and administering of	7.7		5.11
		drugs and medications, diets and test meals	388	859	2.98
10	P.120-9	Planning and co-operation re the care of			
		patients	422	821	2.85
11	P.650-9	Writing orders, directions, and assignments			
		for unit staff re medications, diets, etc	278	748	2.60
12	P.660-98	Supervising the writing of orders and arrange-			
		ments re services involving persons not on			
		unit staff	348	732	2.54
13	H.510-9	Creating and maintaining proper physical	. 1.0		
- 1		environment	348	627	2.18
	P.130-9	Organization of nursing care	128	620	2.15
	P.600-9	Receiving orders from medical staff	374	567	1.97
16	S.520-9	Maintaining good relationships with hospital	260	561	3 06
17	D EEO OG	staff	369	564	1.96
17	P.550-95	Supervising the carrying out of special nursing procedures	266	544	1.89
18	P.570-9	Care on behalf of patient (unit, possessions,	200	744	1.09
10	r. 710-9	and other interests)	286	512	1.78
19	S.430-9	Using opportunities to improve own knowledge		7.2	2.10
	20130	and abilities	18	496	1.72
20	P.670-9	Assembling and maintaining information re			
		patients	388	489	1.70
21	P.640-98	Supervising the recording of administration			
		of medications, treatments, diets, narcotics			
		and alcohol	102	420	1.46
22	P.620-98	Supervising the direct recording of symptoms,			
		conditions, causes	221	408	1.42
23	P.530-9	Preparing and administering drugs and	360	272	3 60
-1	3	medications, diets, test meals	162	370	1.28
24	P.410-9	Advising patient regarding illness and	100	202	1 05
0.5		treatment	132	303	1.05
25	s.530-9	Exchanging information with hospital staff re	220	201	1.01
		hours of duty, assignments	220	291	1.01
		Total Major Activity Groups	9,734	21,044	73.07
		TOTAL MAJOR ACCITATES GLOUPS	7,137	LI,044	13.01
		Total All Activity Groups	14.028	28,800	100.00
		TOORT TELL STORES OF THE OWNER OWNER OF THE OWNER OWNER OF THE OWNER OWNE			

^{*} Activity Groups, identified by tens digit number, accounting for 1% or more of total time, ranked in descending order of time involved.

(Groups do not include Supervision or Direction unless specified S or D)

Table 7

Major Specific Activities*

A. Activities Occurring Most Frequently

D1-	Code No Activity Description Activities		Time		
Rank	Code No	Activity Description	No.	\$	(Intervals)
1	P.501	Observing and recognizing general			
		symptoms and conditions	499	3.56	867
2	P.566	Mental hygiene of patient			724
3	P.502	Observing and recognizing symptoms			
		and conditions of disease	341	2.43	647
4	P.681	Giving information re patient to			
_		medical staff	320	2.28	548
5	н.528	Securing, distributing and storing		0.35	0.00
6	P.612	office supplies on the ward	304	2.17	392
0	P.OLZ	Receiving information re patient from nursing staff	202	2.08	409
7	P.682	Giving information re patient to	292	2.00	409
	1.002	nursing staff	265	1.89	414
8	P.633	Making kardex entries	244	1.74	557
9	5.523	Incidental conversation with		2.01	
		hospital personnel	241	1.72	405
10	S.641	Looking for staff	225	1.60	380
11	P.602	Reading doctor's standing orders			
		or prescriptions	221	1.58	325
12	P.532S	Supervising the administering of			
30	7.300	drugs and medications	217	1.55	501
13	P.123	Planning with nursing staff for	000	7 1.1.	01.5
14	P.671	care of patients	202	1.44	345
15	P.615	Filing records	200	1.43	246
-/	1.01)	from patient's records	197	1.40	322
16	P.121	Planning with the medical staff	<u> </u>	1.40	522
		for the care of patients	196	1.40	437
17	P.513	Accompanying physicians on rounds			
200		to patients	165	1.18	500
18	P.664	Writing orders for services			
CONTRACTOR OF THE PERSON OF TH	,	involving laboratory procedures.	162	1.15	550
19	H.526	Securing, distributing and storing			
	- (nursing supplies on the ward	162	1.15	356
20	P.651	Writing orders, directions and			
		assignments for unit staff re) 350	3 30	005
21	P.685	medications (incl.medicine cards) 158	1.13	395
61	F.005	Giving report re patients to nursing staff	146	1.04	1 001
22	P.634	Making out day and night reports.	145	1.03	1,091
	, , ,		177	1.00	731
		Total Major Activities	5,287	37.69	10,942
			,,		
		Total All Activities	14,028	100.00	28,800

^{*} Activities each accounting for 1% or more of total activities ranked in descending order of number of activities.

Table 7

Major Specific Activities*

B. Activities Taking Most Time

	G 3			T	ime
Ranl		Activity Description	No.	No.	%
	No.		Activities	Intervals	Total Time
1	P.685	Giving report re patients to nursing staff	146	1,091	3.79
2	P.501	Observing and recognizing general symptoms		-,0)-	3.19
		and conditions	499	867	3.01
3	P.566	Mental hygiene of patient	385	724	2.51
4	P.502	Observing and recognizing symptoms and		·	
-		conditions of disease	341	647	2.25
5	P.133	Organizing the time of nursing personnel and			
1 6	D 622	the assignment of duties	121	603	2.09
6 7	P.633 P.664	Making kardex entries	544	557	1.93
	P.004	Writing orders for services involving laboratory			
8	P.681	procedures	162	550	1.91
9	P.634	Giving information re patient to medical staff.	320	548	1.90
10	P.532S	Making out day and night reports	145	531	1.84
10	1,7750	Supervising the administering of drugs and	0.7.77		
11	P.513	medications	217	501	1.74
12	S.433	Attending staff conferences	165	500	1.74
13	P.121	Planning with the medical staff for the care of	3	453	1.57
1 -5	1 • +	patients	106	1.07	3 50
14	P.682	Giving information re patient to nursing staff	196 265	437 414	1.52
15	P.612	Receiving information re patient from nursing	205	414	1.44
	2 0 0 0 0	staff	292	409	1.42
16	S.523	Incidental conversation with hospital personnel.	241	405	1.42
17	P.651	Writing orders, directions and assignments for	241	405	1.44
		unit staff re medications (incl. medicine			
		cards)	158	395	1.37
18	н.528	Securing, distributing and storing office		3//	1001
		supplies on the ward	304	392	1.36
19	S.641	Looking for staff	225	380	1.32
20	н.526	Securing, distributing and storing nursing			5_
ĺ		supplies on the ward	162	356	1.24
21	P.123	Planning with nursing staff for care of patients	202	345	1.20
22	P.663	Writing orders and requisitions for medications			
00	7 (10-	(from pharmacy)	139	341	1.18
23	P.642S	Supervising the recording of administration of			
Ol.	7 (00	narcotics and alcohol	58	338	1.17
24	P.602	Reading doctor's standing orders or			
25	D 635	prescriptions	221	325	1.13
25	P.615	Receiving information re patients from patient's	3.05	000	
26	P.662	records	197	322	1.12
20	P.002	Writing orders for services involving blood	303	202	2 22
		team or blood Bank	121	321	1.11
		Total Major Activities	5 520	10 750	44.28
		TOUGH MAJOI ACUTVIOLES	5,529	12,752	44.20
		Total All Activities	14,028	28,800	100.00
		20 00th Thr. 110 0x 1 x 0x 0x 0 0 0 0 0 0 0 0 0 0 0	1,020	20,000	100.00

Activities each accounting for 1% or more of total time, ranked in descending order of amount of time involved.

code numbers. No one or two activities stand out above all others, but some are relatively more important and these are listed in Table 7. The criterion of selection in Table 7A and B has been 1% or more of the total activities and of the total time, respectively. The 26 activities included in Table 7B account for only 44% of the total time.

The most common Management activities, as indicated in Tables 6 and 7, concern the planning and organizing of patient care, particularly planning with the medical and nursing staffs (P.121, 123) and arranging for the assignment of duties of nursing personnel. The latter (P.133) mostly involved the preparation of rotation and clinical assignment schedules. Supervisory activities were directed particularly towards the administration of drugs and medications, especially narcotics and alcohol; the earrying out of special nursing procedures; the recording of symptoms, conditions and causes; and making arrangements for services not provided by unit staff.

Education or teaching activities involved the patient on the one hand and the head nurse herself on the other. The former consisted chiefly of advising the patient about his illness and treatment. The head nurse used opportunities to improve her own knowledge and abilities; the bulk of time in this connection was spent in attending staff meetings (S.433).

Most of the prominent activities, however, are in the "Execution" category. One large aggregate relates to the giving and receiving of information about patients. The activity taking most time of all (P.685) is of this type and consists mainly of giving day and night reports.

Another considerable series involves the recording and assembling of information about patients and the writing of orders and making arrangements for services. This whole group represents time spent on "paper work" in connection with Patient Care and accounts for over 15% of the time. Some examples from the records are: making kardex entries; writing orders for medications; arranging for blood team or for laboratory or pharmacy services. In addition, time is spent in supervising and directing such activities.

Considerable time was also taken up by functions related to the care of the patient, his interests and environment. One of the most important of these activities has been called "mental hygiene of the patient" (P.566). The following excerpts from the records indicate the type of activity included under this classification:

"tells patient nice to see sitting out of bed - discusses going home";

"tells patient she looks like million dollars with make-up on"; "tells patient 'good reports'";

"asks patient if better than this A.M. - does she want a book".

The two most common and most time-consuming activities in the Ward Administration area involve the handling of nursing and office supplies on the ward. This whole group of activities (H.520-529) is a major one from the standpoint of time involved, about 3% of the total. The possibility that these might be activities that could be carried on by other members of the staff seems borne out by examination of the entries on the activity records, such as the following:

2) brings pad from room to utility room

4) gets rubber gloves and lubricant

H.526: 1) gets I.V. set

³⁾ gets tube, puts away basin, sorts fomentation flannels

- H.528: 1) gets slips 2) gets kardex
 - 3) puts away requisitions and kardex
 - 4) gets chart
 - 5) carries chair (in corridor) 6) gives the student the keys
 - 7) receives keys

It is of some interest also to note the activities which on particular occasions took a relatively long time, such as five minutes or more, in contrast to the average duration of half-a-minute. There were 27 different activities among the 51 activities lasting five minutes or longer. These are shown in Table 8. All but 4 of the 51 occasions were between 5 and 10 minutes duration. The longest two (S.433) involved attendance at a staff meeting. Another extended period was taken up in staff discussion (S.514), while the fourth, lasting just over 10 minutes, was a matter of giving the day and night reports (P.685). Thus the staff was involved in all four, although one also concerned patient care. The total time spent in activities lasting 5 minutes or longer was 1,751 intervals, a little over 7 hours, or about 6% of the total observation time.

Number and Duration of Activities Lasting 5 Minutes or Longer

Code				
No.	Activity	Fre-	Total	
P.114	Assessing the supplies of drugs and medicines against	quency	Time	(Intervals)
	the patient requirements			
P.133	Organizing the time of nursing personnel and the	1	21	21
	assignment of duties	-	3.00	07 00 07
P.511	Assisting physician with treatments	5 2	168	
P.512	Assisting physician with examinations tests specimens	1	49	
P.531	measuring drugs (pouring) (preparing hypos)	2	42	
P.5328	Supervising the administration of drugs & medications	1	28	
P.5578	Supervising the carrying out of preoperative	_		20
5 (30	preparations (including sterile preps.)	1	36	36
P.618	Receiving information re patients from nursing staff			
P.634	day and night reports	1	21	21
P.642S	Making out day and night reports	2	47	22,25
P.0425	The same and the s			
P.654	narcotics and alcohol	4	83	20,20,21,22
1.07	Writing orders, directions and assignments for unit			
P.662	staff re special services for patients Writing orders or requisitions and making arrangements	1	25	25
1.002	re blood team or blood bank			
P.664	Writing orders or requisitions and making arrangements	1	21	21
	re laboratory procedures	,	03	0.7
P.667	Writing orders or requisitions and making arrangements	1	21	21
	re special duty nurse	1	22	22
P.668	Writing orders or requisitions and making arrangements	7	~~	26
	re diet	1	27	27
P.685	Giving information re patient to nursing staff	_	-1	has (
	day and night reports	13	343	20(4),21,23,25
			0 0	26,28,31,33(2),
** E31.				43
H.514	Care of utensils and supplies	1	23	23
н.526	Securing, distributing and storing nursing supplies			
W 5220	on the ward	1	20	20
H 6116	Supervising the checking of laundry and linen	1	22	22
11.0110	Supervising the making out of daily census report	1	20	20
S.170	Planning social activities involving staff			
	participation	1	27	21
S.433	Attending staff administrative conferences	2	31	31 208, 240
S.514	Discussing complaints and criticisms with individual	fon	440	200, 240
	staff members	1	67	67
S.523	Incidental conversation with hospital personnel	1	36	36
S.542	Orientation of staff re ward layout and services	1	33	33
S.544	Orientation of staff re patient characteristics			
- ((including introductions)	2	49	49
5.631	Working with time sheet	1	26	26
27		51	1 751	intomole
)I		intervals or
				7 hrs. approx.
4.				

^{*} Intervals are 15 sec.; thus 20 intervals --5 minutes and 200 intervals -- 50 minutes 40 " -10 " 240 " -- 60 " 60 " -15 "

3. Related Factors - Location, Contacts, Equipment and Supplies

As already pointed out, it was considered that an adequate description of an activity should include reference to the place the activity occurred and any persons, equipment or procedures involved. Data respecting these factors are shown in Tables 9 to 12, and Figures 11-13; some pertinent comments are given below.

Location

The head nurse spent most of her time (60%) in the nursing station, (Table 9). She was at her own desk or the charting desk for half this period. Time spent at the medicine cabinet or cupboard was also considerable.

For nearly one-quarter of the time the head nurse was in patients' rooms or wards. The fact that about 5% of the time was spent in service rooms seems of importance, as is the similarly appreciable portion of time in corridors, stairways, and other such areas.

Some information is available respecting the average length of time a head nurse stayed in one place. The mean duration was about 5.6 intervals or less than $1\frac{1}{2}$ minutes. The median was about 3 minutes, so that half her stays were for three minutes or less. Thus, the head nurse was not only engaged in many activities of very short duration but she was moving about from place to place every two or three minutes.

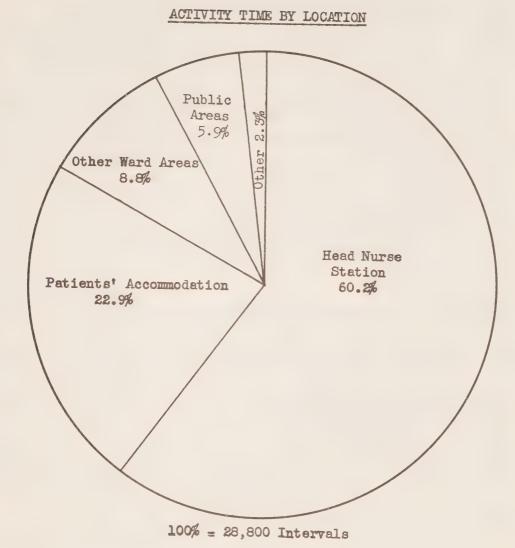


Figure 11. Percent Distribution of Time by Location of Head Nurse

Head Nurse Study: Data from Table 9.

Table 9

Distribution of Time According to Location

Location Code No.	Description	No. of Time Intervals	% Total Time
1 2 3 4 5 6 7 8 9 11 12 13 14 19 1-19 21-26 32-33 41 42 43 44 45 46 41-46	Head Nurse desk Student Nurse desk (alcove or counter) Ward Clerk desk Nursing Supervisor's desk Charting desk Chart rack Bulletin board Blackboard Nurses' Station (unspecified) Medicine cabinet (or cupboard) Narcotics drawer (or cupboard) Drug table Interne desk Rail T o t a l - Head Nurse Station Service Rooms Treatment room and dressing room Private accommodation Semi-Private accommodation Public accommodation Pediatric accommodation Recovery room Bathroom T o t a l - Patients' Accommodation	4,304 200 720 14 4,133 210 129 42 5,857 1,232 12 27 13 448 17,341 1,459 1,079 1,663 3,103 1,181 559 26 54	14.94 0.69 2.50 0.05 14.35 0.73 0.45 0.15 20.34 4.28 0.04 0.09 0.05 1.56 60.21 5.07 3.75 5.77 10.77 4.10 1.94 0.09 0.19 22.87
51 - 59 61 - 66	Public areas - corridor, stairways, etc. Areas outside the ward, e.g., offices, library, etc.	1,665 670	5.78 2.33
	GRAND TOTAL	28,800	100.00

Contacts

In Table 10 it should first be noted that the head nurse is dealing with other people for nearly two-thirds of her time and is alone less than one-third. The patients took more of the head nurse's time (16%) than did any other single category. Other major contacts are with the medical and nursing staffs, about 12% and 34% of the time, respectively. The proportion of time involving auxiliary staff is perhaps not as large as might be anticipated, about 5% in all, most of it with the ward clerk.

Telephone Contacts

Some of the contacts referred to above were by telephone; these accounted for 5½ of the time involving contacts and less than 4% of the total time (Table 11). The main telephone conversations, as might be expected, were with other services and departments in the hospital.

Considerable time was also spent in dealing by telephone with the medical and administrative staffs. Telephone conversation with visitors, clergy, and others amount to only about one-half hour in all.

Forms, Equipment and Supplies

During 60% of the observation period the head nurse's activities involved equipment and supplies of various kinds (Table 12). This included dealing with forms, the "paper-work" of which we hear a great deal and which was referred to above. Such activities accounted for a large part (40%) of the total time. Most of the forms concerned the medical and nursing care of patients. Equipment and supplies were involved in activities taking one-fifth of the total time. As will be seen from Table 12, this time was nearly equally divided between treatment and other supplies.

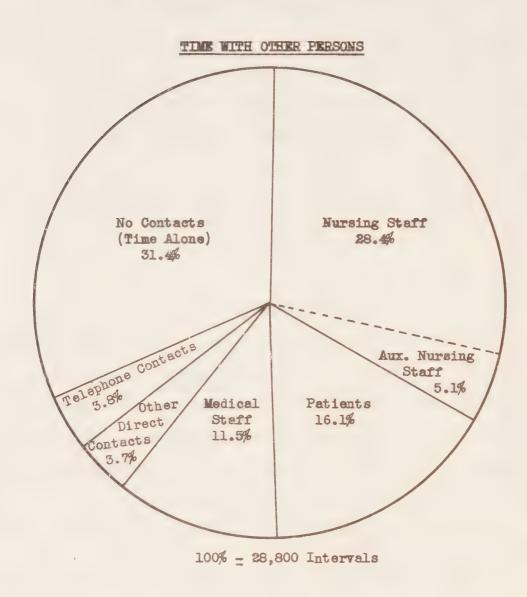


Figure 12. Percent Distribution of Time Spent in Activities Involving Other Persons

Table 10

Distribution of Time Involving Contacts* with Other Persons

Persons Code No.	Description	No. of Time Intervals	% Total Time
0-9 10-14 15-19 20-29 30-39	Hospital administration staff Medical staff D.V.A. staff Nursing, administration staff Nursing, school staff	287 3,471 49 657 296	1.00 12.05 0.17 2.28 1.03
40 41 42 43 44 45 46 49 40-49	Supervisor (Vets. Pav.) Supervisor Head Nurse Assistant Head Nurse General Staff Nurse Special Nurse (private duty) Student nurses Staff (unspecified) T o t a 1 - Nursing staff (excl. admin. & school)	183 236 123 644 2,333 314 2,347 1,186 7,366	0.64 0.82 0.43 2.24 8.10 1.09 8.15 4.12
51 52 53 54 59 50-59	Ward clerk Ward aide Orderly Attendant (psychiatry) Staff (unspecified) T o t a 1 - Nursing staff (auxiliary)	908 202 316 - 42 1,468	3.15 0.70 1.10 0.15 5.10
60-79 80-89 90-94 95	Other services and departments Housekeeping staff Maintenance staff Patients	666 110 27 4,663	2.32 0.38 0.09 16.19
96 - 99 100 101	Other contacts (visitors, clergy, etc.) Personal contacts Outside agencies	665 16 21	2.31 0.06 0.07
And Continues and And	Total Time Involving Contacts	19,762	68.62
	Time Spent Alone (No Contacts)	9,038	31.38
	Grand Total	28,800	100.00

^{*} Including contacts by telephone 1,087 intervals. (See Table 11.)

<u>Table 11</u>
Distribution of Time Involving Direct and Telephone Contacts

		Direct Co	ntacts	Telephone Co	ntacts	Total
Persons	Description	Intervals		Intervals	%	Contacts
Code No.			Grand		Group	(Intervals)
			Total		Total	
0-9	Hospital administration	83	0.3	204	71.1	287
10-14	Medical staff	3,314	11.5	157	4.5	3,471
15-19	D.V.A. officials	34	0.1	15	30.6	49
20-29	Nursing - administration	552	1.9	105	16.0	657
30-39	Nursing - school	296	1.0	_	-	296
40-49	Nursing - general	7,345	25.5	21	0.3	7,366
50-59	Nursing - auxiliary	1,463	5.1	5	0.3	1,468
60-79	Other services and	060	0.0	207	50 ((((
80-89	departments Housekeeping staff	269 10 5	0.9	397	59.6	666
90-94	Maintenance staff	24	0.1	5	11.1	27
95	Patients	4,649	16.1	14	0.3	4,663
96-99	Others	540	1.9	125	18.8	665
100	Personal	_		16	100.0	16
101	Outside agencies	1		20	95.2	21
	Total	18,675	64.8	1,087	5.5	19,762
	Summary:	Intervals	%			
			Grand			
			Total			
	Direct contacts	18,675	64.8			
	Telephone contacts	1,087	3.8			
	No contacts	9,038	31.4			
	Grand Total	28,8 00	100.0			

^{...} Less than 0.05%.

TIME WITH FORMS, EQUIPMENT AND SUPPLIES

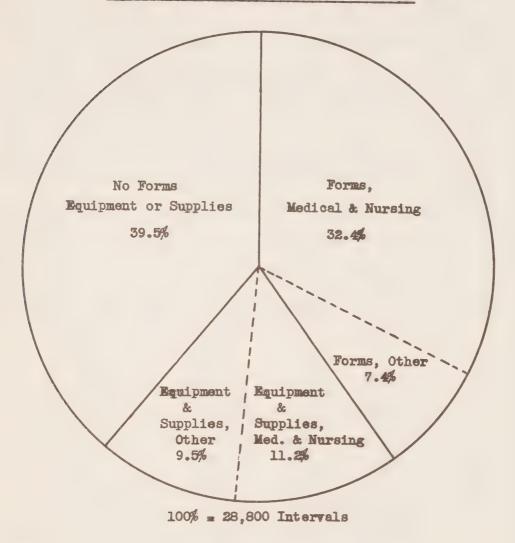


Figure 13. Percent Distribution of Time in Activities Involving Forms, Equipment & Supplies

Head Nurse Study: Data from Table 12.

Table 12
Distribution of Time Involving Forms, Equipment and Supplies

% Time Involving Forms, Equip. & Supplies	10.56	0.60	37.51 6.47 9.64 53.62	2.54	100.00		
% Total Time	6.39	1.10	22.70 3.91 32.45	1.54	60.52	39.48	100.00
No. of Time Intervals	1,841 3,224 888 5,953	317 105 957 1,379	6,537 1,127 1,681 9,345	4443 301 8 752	17,429	11,371	28,800
Description	Equipment & supplies, administration Equipment & supplies, medical & nursing (treatment) Equipment & supplies, maintenance & housekeeping Equipment and Supplies	Forms, hospital administration of patient movement Forms, hospital administration of patient care Forms, staff administration Forms, administration	Forms, unit records of patient care Forms, other departments' records of patient care Forms, orders and records for medications Forms, medical and nursing (treatment)	Forms, dietary Forms, supply requisitions (excl. medications) Forms, other Forms, maintenance and housekeeping	Total Forms, Equipment and Supplies	No Forms, Equipment or Supplies Involved	Grand Total
Equipment & Supply Code No.	012-013 022-027 032-035 Total	101-109 110-119 120-129 Total	200-209 210-219 220-229 Total	301-307 310-314 319 Total			

4. Period of the Day

In the daily routine of the hospital the head nurse has certain activities occurring at more or less regular times. Such responsibilities as reading the night report on patients to the nursing staff, and going on rounds with doctors will be normal activities in the early part of the day. The day report on patients is prepared in the late afternoon. Activities concerned with the arranging of patients' meals and diets will occur in short periods three times a day.

Although these activities were observed in anticipated times of the day, they were not carried on without interruption and, as demonstrated in Tables 13 to 14, there is relatively little variation in activity pattern from one period of the day to another. The average duration of an activity throughout the day is consistently about one-half minute, with a range of less than one interval.*

The proportion of time devoted to Patient Care activities was lower in the first period of the day and in the late afternoon. Ward Administration was most prominent in the hour from 4.30 to 5.30 P.M. Due largely to the attendance of two head nurses at a staff meeting which occupied most of the observation hour, Personnel Administration showed its highest proportion of time in the last hour of the day.

From the standpoint of level of activity, Management functions predominate in mid-morning (Period 3) and Supervision in the first hour of the day. Activities which could be classed as Direction seemed to consistently involve about 5% of the time throughout the day. Time spent in Education was most prominent in the last period due to the staff meeting already mentioned.

^{*} See also Appendix D, pp.105, 108-9.

In the sixth period of the day, 3 to 1 P.M., Execution activities are relatively most important, but it is the Administration and Clerical activities not Direct Execution functions that account for this; in fact, the latter were less evident here than at other times.

The explanation of this situation may be that at this time of day the head nurse is quite frequently off duty. As noted clsewhere (p. 112), the assistant head nurses and staff nurses who substitute for head nurses spent relatively more time in Execution - Administrative and Clerical activities than did the head nurses.

A. Number, Duration and Area of Activities by Period of the Day

Period	Area of Activity			Total	Duration	Duration (Intervals)		
reriod	Patient Care	Ward Admin.	Personnel Admin.	Activities ²	Total	Mean		
1 2 3 4 5 6 7 8	1027 1468 1390 1380 1410 1228 1285 1260	261 194 211 286 240 204 346 303	169 182 173 190 128 177 151	1477 1892 1802 1878 1802 1630 1817	3600 3600 3600 3600 3600 3600 3600	2.44 1.90 2.00 1.92 2.00 2.21 1.98 2.08		
All Periods	10448	2045	1310	14028	28800	2.05		

B. Time Involved in Activities by Area of Activity and Period

		0		
Period	Patient Care	Ward Admin.	Personnel Admin.	Total ²
1 2 3 4 5 6 7 8	2593 2912 2892 2794 2851 2867 2544 2405	524 286 343 466 489 324 736 467	459 349 332 313 225 384 281 697	3600 3600 3600 3600 3600 3600 3600
All Periods	21858	3635	3040	28800

C. Percent Time Involved in Activities by Area of Activity for Each Period

Period	A	Area of Activity					
	Patient Care	Ward Admin.	Personnel Admin.	Total ²			
1 2 3 4 5 6 7 8	72.03 80.89 80.33 77.61 79.19 79.64 70.67 66.81	14.56 7.94 9.53 12.94 13.58 9.00 20.44	12.75 9.69 9.22 8.69 6.25 10.67 7.81 19.36	100.00 100.00 100.00 100.00 100.00 100.00			
All Periods	75.90	12.62	10.56	100.00			

Duration and Time expressed in intervals of 15 seconds.

Total includes 225 other activities amounting to 267 intervals.

Table 14

A. Number of Activities by Level of Activity and Period

Level of Activity								Grand	
Period	Manage-	Super-	Direction	Education	I	Execution		Other	Total
	ment	vision			Direct	Admin.%	Total		10041
						Clerical			
1	99	296	102	27	423	510	933	20	1477
2	120	267	105	77	633	61.2	1275	48	1892
3	158	276	123	43	478	696	11'74	28	1802
4	114	314	143	37	494	754	1.248	55	1878
5	90	303	130	48	541	666	1207	24	1802
6	80	351	119	25	306	728	1034	21	1630
7	123	316	114	41	555	633	1188	35	1817
8	97	306	134	68	622	476	1098	27	1730
All	881	2429	970	366	4052	51.05	9157	225	71,008
Periods				544		The state of the s	AND DESCRIPTION OF THE PARTY OF	1 550	14020

B. Time Involved* in Activities by Level of Activity and Period

	Level of Activity								
Period	Manage-	100	Direction	Education		Execution	COURSEAGUS MARKAGE SPACEOUS	Other	Grand Total
	ment	vision			Direct	Admin.& Clerical	1		
1	264	822	132	55	797	1506	2303	24	3600
2	271	54,2	155	153	1227	1199	5450	53	3600
3	593	479	176	99	1008	1313	2220	33	3600
4	300	572	203	90	984	1424	24 8	27	3600
5	220	546	175	104	1087	1433	2520	35	3600
6	165	643	163	72	620	1912	2532	25	3600
7	336	619	160	95	1141	151:	2351	39	3600
8	170	553	176	621	1128	921	2049	31	3600
All Periods	2319	4776	1340	1289	7992	1081.7	18800	267	28800

C. Percent Time Involved in Activities by Level of Activity for Each Period

Donal		1	L	evel of Ac	tivity	g vegetter, dag vegetter fan State Annah staget in 120 k feldig spilledigen op 25 3 december 120 kepter fan State State yn 150 de digwyn oed yn 150 kepter fan State Sta	BEEL ELEGENEEN DE TERMENE ELEGENEEN DE LEGENEEN DE LEG	a Open Principal Control of the Cont	Grand Total
Period	Manage- ment	Super- vision	Direction	Education	collections in Assessment Collection and	Admin.& Clerical	Total	Other	
1 2 3 4 5 6 7 8	7.33 7.53 16.47 8.33 6.11 4.58 9.33 4.72	22.83 15.06 13.31 15.89 15.17 17.86 17.19 15.36	3.67 4.31 4.89 5.64 4.86 4.53 4.44 4.89	1.53 4.25 2.75 2.50 2.89 2.00 2.64 17.25	22.14 34.08 28.00 27.33 30.19 17.22 31.69 31.33	41.83 33.31 33.67 39.56 39.81 53.11 33.61 25.58	63.97 67.39 61.67 66.89 70.00 70.33 65.31 56.92	1.47 0.92 0.75 0.97 0.69 1.08	100.00 103.00 100.00 100.00 100.00 100.00
All Periods	8.05	16.58	4.65	4.48	27.75	37.56	65.31	0.93	100.00

^{*} Time expressed in Intervals of 15 seconds.

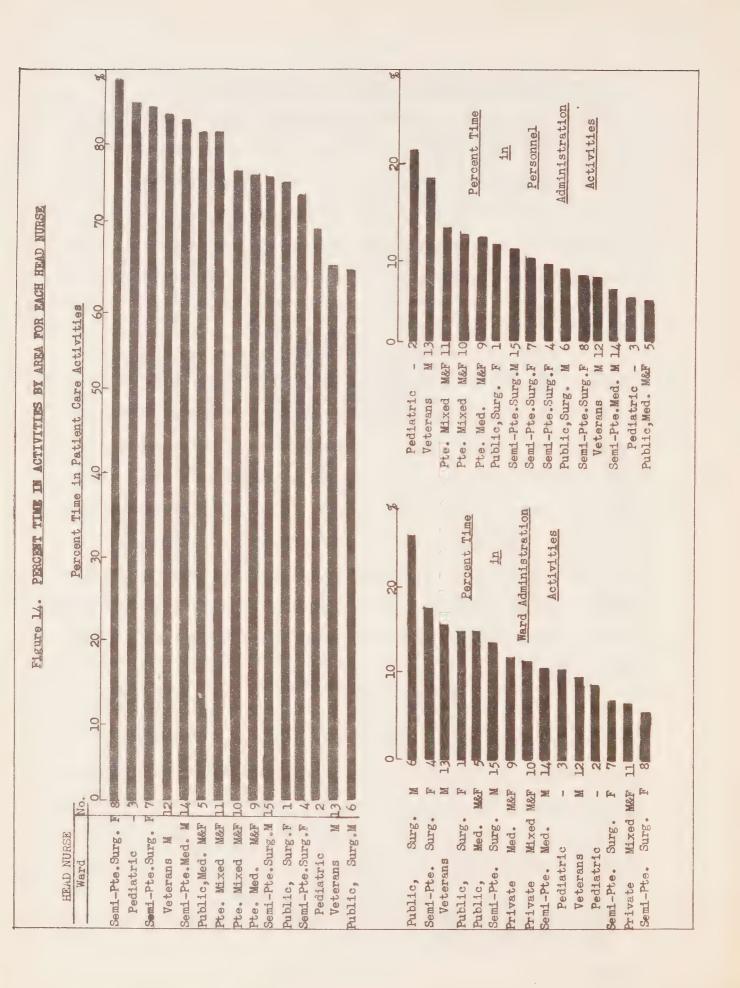
5. Differences in Head Nurse Activity Pattern

The Study was designed to obtain the overall characteristic pattern of the activities of the head nurse in a general hospital. This has now been described. While the Study was not intended specifically to measure and evaluate differences in activity pattern -- such as those between head nurses and between wards, some interesting and useful information was of course obtained as a consequence of the comprehensive nature of the records.

That there are differences in head nurses is evident from a simple examination of tabulations of data for each head nurse. The frequency and duration of activities and the pattern indicated in the distribution of activities by area and level are shown in Tables 15 to 17 and summarized in Figures 14 and 15. All head nurses had mean activity durations between 1.88 and 2.60 intervals, i.e., within one-quarter minute. Thus, there is no difference of practical importance in the average duration of activities. The consistency of this aspect of the head nurse's activity, already referred to as an important observation, is seen to hold even in relation to individual head nurses operating under quite different circumstances.

One might expect that the variations in the pattern of the activities of the head nurses would be a reflection of differences in the characteristics of the wards. These will include the status of the ward, the type and sex of the patients, and the patient load (as indicated by indices such as beds occupied, patient/staff ratio, and turnover). In addition, wards in the veterans' pavilion in the hospital differ from others in that they have graduate nurses only, no student nurses.*

^{*} Another factor of importance is the status of nurse actually observed.
- This is considered in Appendix D-1.



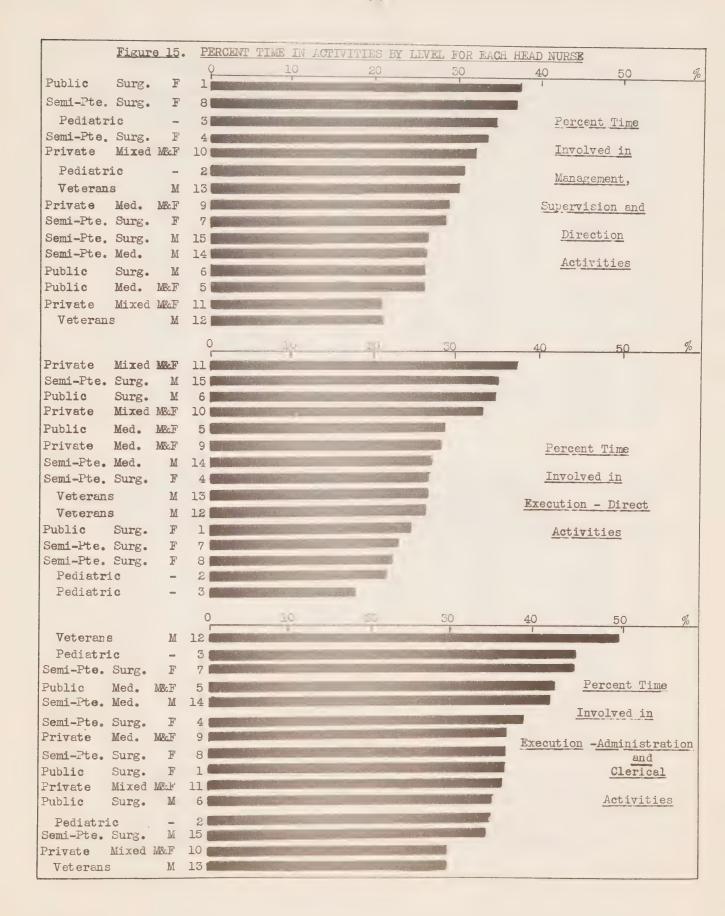


Table 15
Number and Duration of Activities by Head Nurse

		Total	Mean
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15	987 810 931 988 1,023 947 968 988 958 960 957 827 739 1,000 945	1,920 1,920 1,920 1,920 1,920 1,920 1,920 1,920 1,920 1,920 1,920 1,920 1,920 1,920 28,800	1.95 2.37 2.06 1.94 1.88 2.03 1.98 1.94 2.00 2.00 2.01 2.32 2.60 1.92 2.03

Table 16

A. Activities by Area of Activity for Each Head Nurse

Head Nurse			tivity	
No.	Patient Care	Ward Admin.	Personnel Admin.	Tota 12
1 2 3 4 5 6 7 8 9 10 11 12 13 14	706 627 723 667 774 627 768 819 683 701 715 623 529 792	183 85 122 203 184 209 92 76 145 135 86 105 131	89 87 67 109 55 88 99 75 109 106 138 83 64 66	987 810 931 988 1,023 947 968 988 958 950 957 827 739
15	694	163	75	945
Tota	10,448	2,045	1,310	14,028

Duration and Time expressed in Intervals of 15 seconds.

Total includes 225 other activities amounting to 267 intervals.

Table 16

B. Time Involved in Activities by Area of Activity for Each Head Nurse

Head Nurse	Are	a of Ac	tivity	
No.	Patient Care	Ward Admin.	Personnel Admin.	Tota 12
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15	1,407 1,305 1,598 1,388 1,531 1,213 1,586 1,643 1,433 1,438 1,519 1,574 1,227 1,570 1,426	292 170 206 350 290 511 139 112 235 224 129 189 306 211 271	209 428 96 171 89 167 183 146 229 238 252 138 369 118 207	1,920 1,920 1,920 1,920 1,920 1,920 1,920 1,920 1,920 1,920 1,920 1,920 1,920 1,920 1,920
Total	21,858	3,635	3,040	28,800

C. Percent Time Involved in Activities by Area of Activity for Each Head Nurse

Head Nurse	Area	a of Ac	tivity	
No.	Patient Care	Ward Admin.	Personnel Admin.	Total ²
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15	73.28 67.97 83.23 72.29 79.74 63.18 82.60 85.57 74.64 74.90 79.11 81.98 63.91 81.77 74.27	15.21 8.85 10.73 18.23 15.10 26.61 7.24 5.83 12.24 11.67 6.72 9.84 15.94 10.99 14.11	10.89 22.29 5.00 8.91 4.64 8.70 9.53 7.60 11.93 12.40 13.12 7.19 19.22 6.15 10.78	100.00 100.00 100.00 100.00 100.00 100.00 100.00 100.00 100.00 100.00 100.00 100.00
Total	75.90	12.62	10.56	100.00

Duration and Time expressed in Intervals of 15 seconds.

Total includes 225 other activities amounting to 267 intervals.

Table 17

A. Activities by Level of Activity for Each Head Nurse

Head		· ,	Le	evel of Act					Grand
Nurse	Manage-	Super-	Direction	Education		Execution		Other	Total
No.	ment	vision			Direct		Total		10000
					The state of the s	Clerical			
1	86	174	86	15	268	349	617	9	987
2	71	129	60	17	218	304	522	11	810
3	53	217	53	20	198	371	569	19	931
4	68	188	73	7	587	359	643	9	988
5	45	186	56	22	310	394	704	10	1,023
6	44	175	54	28	315	308	623	23	947
7	60	165	76	31	229	397	626	9	968
8	58	219	81	34	241	337	578	18	988
9	71	136	85	36	307	302	609	21	958
10	61	194	71	28	315	273	588	18 18	960
11	33	130	67	30	351	328	679	16	957 827
12	54	100	28	14	222	393 267	478	15	739
13	57 62	147	57 64	36	278	397	675	16	1,000
15	58	146	59	38	305	326	631	12	945
1 -))0	7.40	27	30	202) U	0)1		
Total	881	2,429	970	366	4,052	5,105	9,157	225	14,028

B. Time Involved* in Activities by Level of Activity for Each Head Nurse

Head			Le	evel of Act	tivity				
Nurse	Manage-	Super-	Direction	Education	AND PERSONAL PROPERTY.	Execution	PARTY AND PERSONS ASSESSED.	Other	Grand
No.	ment	vision			Direct	Admin.& Clerical	Total		10001
1	271	335	114	26	4.74	688	1,162	12	1,920
2	298 142	219 451	79 70	238 39	415 343	653 855	1,069	17 20	1,920
3 4	175	375	90	11	520	738	1,258	11	1,920
5	92	337	70	43	555	813	1,368	10	1,920
6	119 .	310	74	52	672	664	1,336	29	1,920
7	126	315	104	76	442	845	1,287	12	1,920
8	152 171	442 271	112 118	69 98	435 547	691 692	1,126	19 23	1,920
10	130	388	101	76	645	560	1,205	20	1,920
11	72	228	99	108	717	676	1,393	20	1,920
12	120	558	50	39	511	953	1,464	19	1,920
13	145	344	82	262	515	554	1,069	18	1,920
14 15	133 173	278 25 5	94 83	74 78	527 673	793 642	1,320 1,315	21 16	1,920 1,920
Total	2,319	4,776	1,340	1,289	7,992	10,817	18,809	267	28,800

^{*} Time expressed in Intervals of 15 seconds.

Table 17

C. Percent Time Involved in Activities by Level of Activity for Each Head Nurse

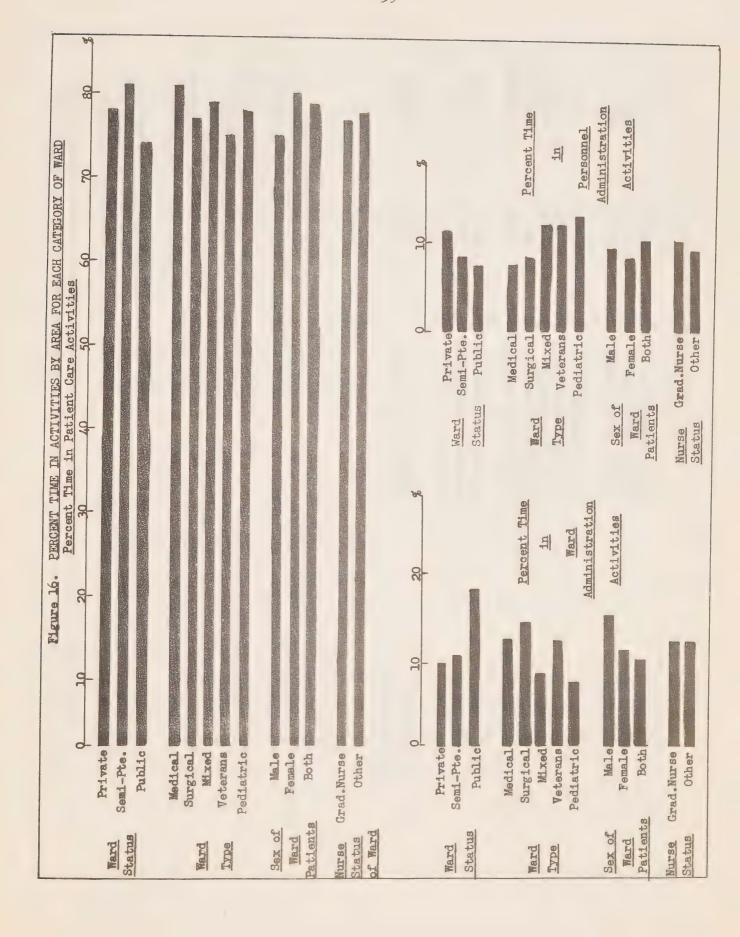
					_														
	Grand	Total	100.00	100.01	100.00	66.66	100.00	100.00	100.01	100.00	66.66	100.00	66.66	86.66	100.00	100.00		66.66	
	Other		0.63	0.89	1.04	0.57	0.52	1.51	0.63	0.99	1.19	1.04	1.04	0.99	ま。	1.09	0.83	8.0	
		Total	60.52	55.68	62.40	65.52	71.25	69.58	67.03	58.65	64.53	62.76	72.55	76.25	55.68	68.75	64.89	65.31	,
t y	Execution	Admin.& Clerical			44.53												33.44	37.56	
tivi		Direct	24.69	21.67	17.86	27.08	28.91	35.00	23.02	22.66	28.49	33.59	37.34	26.61	26.82	27.45	35.05	27.75	
of Ac	Education		1.35	12.40	2.03	0.57	2.24	2.71	3.96	3.59	5.10	3.96	5.62		13.65			1,48	
Level	Direction		5.94	4.11	3.65				_				5.16			6.4		4.65	
	Supervision		17.45	11.41	23.49	19.53	17.55	16.15	16.41	23.02	14.11	20.21	11.87	11.87	17.92	14.48	13.28	16.58	
	Management		14.11	15.52	7-40	1.6.	4.79	6.20	6.56	8.0	8.91	6.77	3.75	6.25	7.55	6.93	9.01	8.05	
Head	Nurse	No.	Н	N	m-	# 1	v,	0	<u></u>	Ω	0	07		7	T.	14	15	Total	

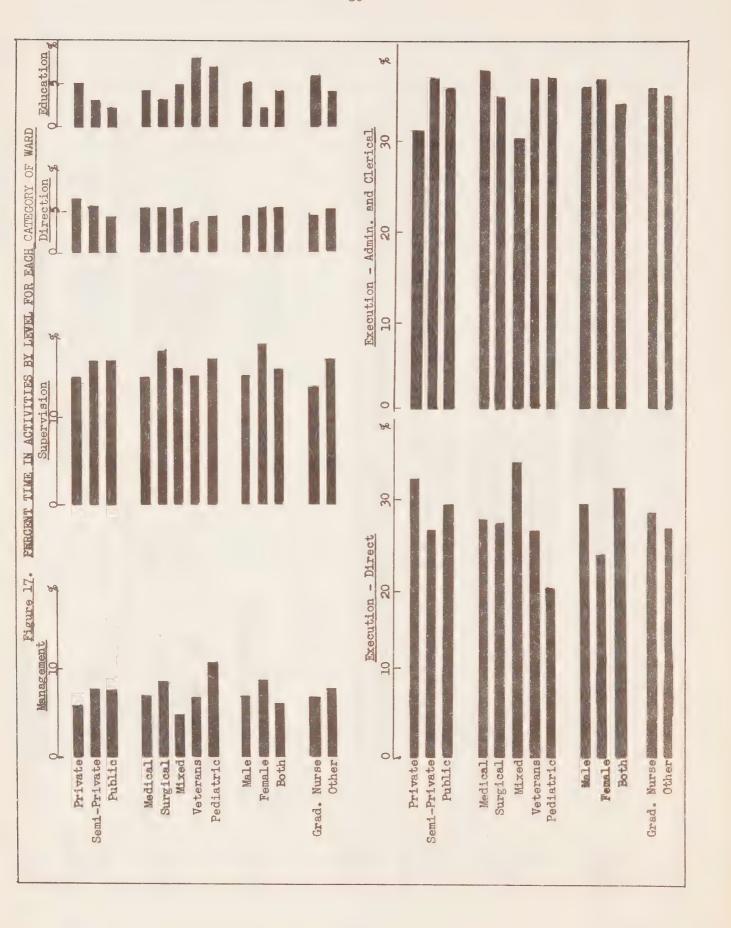
The difficulty in interpreting differences in activity pattern between head nurses in the light of these factors is that their effects cannot be isolated. It is of interest, however, to present the relevant data from the records as it adds to the picture of head nurse activities and demonstrates the type of information obtainable from studies of this kind. The data have been examined with these considerations in mind and are presented with some comments respecting relationships of particular interest or importance.

The distribution of activities by area and level for various categories of wards is given in tables in Appendix F, and is summarized graphically in Figures 16 and 17.

The important fact made clear by the four graphs and the accompanying tables is that the pattern of activity is surprisingly similar regardless of the head nurse's surroundings. The area and level relationships of activity time, already outlined, hold even when the wards are considered in groups according to their characteristics.

Thus, it can be seen from Figure 16 that for all categories of ward the bulk of the head nurses' time is spent on Patient Care. There is relatively little variation in this regard, the range being from 73 to 79%. The wards in which the highest proportion of time is spent on Patient Care are the semi-private, the medical wards, and wards having female patients. Considering individual wards, we note in Figure 14 that Wards 7 and 8 -- both of which are semi-private, surgical, female wards -- rank high in Patient Care time. These two wards share a supervisor. Does this arrangement result in head nurses spending relatively more time in Patient Care?





The two children's and two veterans' wards also have supervisors but on only one of each pair (Wards 3 and 12) did the head nurses spend a high proportion of time on Patient Care. The other two head nurses (Wards 2 and 13) were attending a staff meeting (S.433) for practically a full observation hour and this largely accounts for their high proportion of time in Personnel Administration. It seems likely that the head nurses on these children's and veterans' wards also devote a relatively high proportion of time to Patient Care.

Administration (Figures 14 and 16). Public wards show a particularly high proportion of time devoted to this area. Examination of the data for individual head nurses indicates that Ward 6, a public surgical, male ward, is responsible for this predominance of War Administration activities. For this ward the type of activity which took most of the time was H.514 - care of utensils and supplies. This did not generally appear as a major activity for other head nurses. Another activity in this group was also relatively more important for this ward than for others, viz., H.527 - securing, distributing and storing housekeeping supplies on the ward.

In <u>Personnel Administration</u> the range was only 8 to 14%, with mixed medical and surgical, and children's and veterans' wards showing highest percentages in this area. As already mentioned, the attendance of two head nurses at a staff meeting largely accounts for the high rank shown in this area for the one children's and one veterans' ward.

The distribution of time according to level of activity, as indicated in Figures 15 and 17, demonstrates the consistent preponderance of time devoted to Execution activities. In this level there is greater variation in Direct Execution than in Administrative and Clerical activities. Both children's wards show a low proportion of time on Direct Execution activities. In wards mixed as to both type and sex of patients and also in private wards, Direct Execution activities took a great deal of time while Administrative and Clerical activities were relatively less important.

Management, Supervision and Direction seem to take roughly the same proportion of the head nurse's time in wards of various kinds.

Wards 11 and 12 which are the lowest, have little in common.

Veterans' and children's wards appear to require a lot of time for <u>Education</u> but this may be attributed to the staff meeting referred to above. As might be expected, head nurses on wards staffed entirely by graduate nurses spend less time on <u>Education</u> than those on wards with student nurses, but the difference is slight.

Patient Load

In addition to the characteristics of the ward represented by such factors as pay status and the type and sex of patients, another important attribute concerns the relative patient load on the wards. The activity pattern in terms of area and level has therefore been reviewed in the light of --

- a) the number of patients -- average beds occupied
- b) the turnover -- patient days as percent (admissions plus discharges)
- c) the ratio of patients to nursing staff.

The relevant data given in Table 18 and in the tables of Appendix F have been analyzed by comparing the percentages of total time for activity areas and levels with the above patient load indices. It is of interest, first of all, that there is no correlation between the ranks of the wards on any pair of these three factors. With two exceptions, there were no significant correlations (Spearman rank coefficient) between the ranks of wards for any of the above indices and the rank on the basis of percent time involved in activities of specified areas and levels. There was a significant positive correlation between Education and turnover, so that head nurses on wards having a relatively high turnover index had the highest proportion of time spent on Education activities. The other exception was a negative correlation between turnover and Ward Administration. The reason for these apparent correlations is not evident; the former may be due to orientation of new patients.

Thus, although there is a considerable range from high to low wards in respect to these indices of patient movement as shown in Table 18, this apparently does not result in corresponding variation in the activity pattern.

Table 18

Ward Characteristics, Patient Load and Staff

A. Ward Characteristics and Patient Load (Daily Averages for ly Days Oct. 15-19, 22-26)

H.N.	Location		W a r	đ	No. Beds	Beds Occup.	Beds	Admis.	Discharges	Turnoverl
		Status	Type	Sex		4	Ď			A + D
Н	田	Public	Surg.	Female	51	49.7	50.7	2.6	2.2	7.2
0 0	MI	Children	Ped.	Both(M+F)	82	78.5	80.7	0.6	9.5	16.9
7	2E	Semi-Pte.	Surg.	Female Female	45	51.9	53.8	2.4	2.7	7.7
77.	2C	Public	Med.	Both(M+F)	56	52.7	55.9	2.7	- 01	- 00
9	2W S	Public	Surg.	Male	79	58.7	6.09	3.1	2.8	8.9
7	N-M+	Semi-Pte.	Surg.	Female	37	65.1	62.6	5.2	4.9	12.1
Φ	8-M4	Semi-Pte.	Surg.	Female	29				\	
0	4瓦	Private	Med.	Both (M+F)	54	42.3	47.9	3.2	3.1	11.1
10	SE.	Private	Mixed	Both (M+F)	36	34.1	35.0	8.	N.	0
77	MS	Private	Mixed	Both (M+F)	35	33.6	34.9	3.0	2.7	13.4
12	Pav.A	Vets	Vets	Male	54	52.0	54.0	1.3	7.5	4.2
23	Pav.B	Vets	Vets	Male	1 9	46.5	51.0	3.0	2.7	0,3
14	Pav.C	Semi-Pte.	Med.	Male	75	32.7	37.6	11.9	0	0.84
15	Pav.D	Semi-Pte.	Surg.	Male	54	53.4	54.0	4.2	w	0.17
EH					709	653.2	682.3	53.4	40.7	8, [
					-	- 1				2

1 Purnover = Beds Occupied X 100 Admissions Discharges

Table 18

B. Ward Staff - (Daily Averages for 10 Days Oct. 15-19, 22-26)

_	0.															
Patientsl	Total Staff	2.06	1.92	2.55	2.12	2.06		1.82	1.96	1.71	1.79	4.52	4.58	2.29	2.80	2.26
Total	1000	23.6	40.8	20.3	24.9	28.5	19.3	16.6	21.6	20.0	18.8	11.5	10.6	14.3	18.4	289.2
Ward	W TOTO	7.4	2.0	0.	1.0	1.5	1.0	1.0	0.	1.0	0.	1.0	0.	1.0	1.0	15.5
Ward			5.8	7.7	1.5	2.5	ا 9	2.5	2.1	2.4	0.	1.7	ı	2.7	3.4	32.0
Student		13.0	23.8	11.1	17.1	16.4	10.1	7.9	15.2	11.2	13.3	1	1	1	1	139.1
Total Grad.N.		5.9	9.5	6.9	5.3	0°,	4.9	5.2	3.4	5.4	3.7	တ္	2.6	10.6	14.0	102.6
Gen. Staff	Nurse	3.6	4.9	5.3	4.6	4.9	7.4	3.0	1.8	3.7	0"0	<u>س</u> ش	χ 	0	12.2	78.4
Asst. Head N.		7.4	1	φ.	1.0	ထံ (တ် (ώ.	-7	<u>_</u>	φ.	1	ı	٠. د	0,	9.5
Head Nurse		6.	1.9	ထ့	0	0,1	o.	· ·	0	0.1	0.1	٣٠١	0.0	ည္	ن	12.4
Sup.		ı	0.	1	ı	ı	£ -	0	ı	ŧ	ı	10	0	1	1	5.6
H.N.		Н (N M	4	rv /	0 1		χ) (2,	9;	77.	77	- T-	7 1	77	EH

Patients = Beds Occupied.
Total Staff Total Staff(Col.10)

Related Factors

It is difficult also to assess the differences between head nurses with respect to the time spent at various locations and in activities involving contacts, forms, equipment and supplies (Tables 19-21). It is evident, for instance, that the head nurses on Wards 10 and 11 spent relatively more time with patients (as indicated by both Locations (Patients' Accommodation) and Contacts (Patients)*, and least time in other contacts and with forms, equipment and supplies. These are private wards with patients of both sexes and both medical and surgical cases: the latter factor only is shared by these two wards and not by the others. Though this might be a determining factor, it is noted in addition, that for a relatively high proportion of time the assistant head nurse rather than the head nurse was the subject of observation on the wards. This is also the case for head nurse on Ward 15 -- the next highest with respect to Patients' Accommodation and Patients. These wards were prominent too in proportion of time devoted to Personnel Administration and Direct Execution activities.

The fact that the head nurses on Wards 2 and 13 spent least time in the head nurse station and most in other areas, for example, may be because only these two head nurses were observed while attending the staff meeting.

There seems little in common between Wards 4 and 12 in respect to ward characteristics but for both wards the staff nurse was observed for a considerable proportion of the time; perhaps these nurses were inclined to remain at the nursing station to look after things there while the head nurse was away. These two head nurses were among the lowest in time spent with patients.

^{*} There is, of course, a high correlation between time spent in Patients' Accommodation and time in Contacts with Patients.

The head nurse on Ward 2, the children's ward, spent a relatively large amount of time in service rooms on the ward; there is no obvious explanation of this.

When these factors, location, contacts, forms, equipment and supplies involved, are considered in relation to patient load indices we find only two correlations of interest. There appears to be a tendency for the head nurse on the larger wards (more beds occupied) to have a relatively high proportion of activity time devoted to forms, equipment and supplies and comparatively little time spent in dealing with other people.

As indicated above, these comments and data are presented as adding to the description of head nurse activities, but explanations of the possible relationships are not generally feasible in view of the multiplicity and interdependence of the factors involved.

Table 19

Time of Each Head Nurse by Locations (Places Activities Occurred)

A. Number of Intervals

			cati			Marke 1
Head Nurse	Head Nurse Station	Patients accommoda- tion	Other Ward Areas	Public Areas	Other areas outside Ward	Total
10 70 70 70 70 70 70 70 70 70 70 70 70 70	1227 874 1246 1383 1034 1111 1267 1271 1233 1065 1054 1379 899 1265 1033	427 315 313 319 497 430 416 455 633 647 267 373 455 584	160 418 222 153 164 255 151 99 137 82 33 167 238 75 184	106 105 124 65 65 124 86 95 140 186 100 130 125 119	208 15 - 160 - - - - 7 280	1920 1920 1920 1920 1920 1920 1920 1920
All Head Nurses Total	17341	6,586	2,538	1,665	670	28,800

B. Percent Distribution

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15	63.91 45.52 64.90 72.03 53.85 57.86 65.99 66.20 64.22 55.47 54.90 71.82 46.82 65.89 53.80	22.24 16.41 16.30 16.61 25.89 22.40 21.67 23.70 23.70 33.70 13.91 19.43 23.70 30.42	8.33 21.77 11.56 7.97 8.54 13.28 7.86 5.16 7.14 4.27 1.72 8.70 12.39 3.90 9.59	5.52 5.47 6.46 3.39 3.39 6.48 4.95 7.29 9.69 5.21 6.51 6.50	10.83 0.78 8.33 - - - - 0.36 14.58	100.00 100.00 100.00 100.00 100.00 100.00 100.01 100.01 100.00 100.01 100.00 99.99 100.00 100.01
All Head Nurses Total	60.21	22.87	8.82	5.78	2.33	100.01

Table 20

Time of Each Head Nurse by Contacts (Persons Involved in Activities)

A. Number of Intervals*

Contacts Head Nurse	Medical Staff	Nursing Staff (Excl.aux.)	Auxiliary Nursing Staff	Patients	Other Contacts	No Contacts	Total
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15	310 215 153 222 252 212 227 191 120 143 259 425 246 266 230	610 677 460 522 645 542 660 573 631 590 548 363 637 483 378	79 160 111 51 70 91 83 44 101 79 69 126 107 122 175	262 177 184 169 322 289 239 325 358 561 555 178 260 353 431	102 86 103 184 83 153 114 59 152 98 106 153 190 130 128	557 605 909 772 548 633 597 728 558 449 383 675 480 566 578	1920 1920 1920 1920 1920 1920 1920 1920
All Head Nurses Total	3471	8319	1468	4663	1841	9038	28800

B. Percent Distribution

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15	16.15 11.20 7.97 11.56 13.12 11.04 11.82 9.95 6.25 7.45 13.49 22.14 12.81 13.85 11.98	31.77 35.26 23.96 27.19 33.59 28.23 34.37 29.84 32.86 30.73 28.54 18.91 33.18 25.16 19.69	4.11 8.33 5.78 2.66 3.65 4.74 4.32 2.29 5.26 4.11 3.59 6.56 5.57 6.35 9.11	13.65 9.22 9.58 8.80 16.77 15.05 12.45 16.93 18.65 29.22 28.91 9.27 13.54 18.39 22.45	5.31 4.48 5.36 9.58 4.32 7.97 5.94 3.07 7.92 5.10 5.52 7.97 9.90 6.67	29.01 31.51 47.34 40.21 28.54 32.97 31.09 37.92 29.06 23.39 19.95 35.16 25.00 29.48 30.10	100.00 100.00 99.99 100.00 99.99 100.00 100.00 100.00 100.00 100.00 100.00
All Head Nurses Total	12.05	28.89	5.10	16.19	6.39	31.38	100.00

^{*} Includes 1,087 intervals of contacts by telephone.

Table 21

Time of Each Head Nurse by Forms, Equipment and Supplies Involved

A. Number of Intervals

Forms, Equip. & Supplies	Form Medical	s Other	& Suppli		None	Total
Nurse	& Nursing		& Nursing	O ULLU I	1,0320	10001
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15	530 455 904 697 686 464 743 743 582 437 459 814 553 736 542	275 281 180 160 93 126 110 176 189 108 70 44 118 70 131	197 100 185 307 235 261 286 190 253 186 203 237 128 135 321	140 132 114 249 159 349 108 113 195 153 156 187 287 125 262	778 952 537 507 747 720 673 698 701 1036 1032 638 834 854 664	1920 1920 1920 1920 1920 1920 1920 1920
All Head Nurses Total	9345	2131	3224	2729	11371	28800

B. Percent Distribution

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 All Head Nurses	27.60 23.70 47.08 36.30 35.73 24.17 38.70 30.31 22.76 23.91 42.40 28.80 38.33 28.23	14.32 14.64 9.37 8.33 4.84 6.56 5.73 9.17 9.84 5.62 3.65 2.29 6.15 3.65 6.82	10.26 5.21 9.64 15.99 12.24 13.59 14.90 9.90 13.18 9.70 10.57 12.34 6.67 7.03 16.72	6.87 5.94 12.97 8.28 18.18 5.62 5.89 10.16 7.97 8.12 9.74 14.95 6.51	40.52 49.58 27.97 26.41 38.91 37.50 35.05 36.35 36.51 53.96 53.75 33.23 43.44 44.48 34.58	99.99 100.00 100.00 100.00 100.00 100.00 100.00 100.01 100.00 100.01 100.00 100.00
Total	32.45	7.40	11.19	9.48	39.48	100.00

6. C.N.A. Allocation of Activities to Appropriate Nurse Status

While this was primarily a descriptive study to show what the head nurse was doing, it was obviously desirable to attempt some evaluation of her activities by way of answering the question: Is the head nurse spending her time on functions appropriate to her position, or is she devoting time to duties that should be performed by others?

Unfortunately, no authoritative standards are immediately available and applicable to say what a head nurse should or should not be doing. As mentioned earlier, there is general agreement that she is the manager or administrator of a nursing unit. Various statements of her duties and responsibilities have been prepared but these are usually expressed in general terms or without distinguishing clearly those duties which are the primary responsibility of the Head Nurse in contrast to others on the nursing staff. Nor are there any quantitative standards available indicating the proportion of time that should be devoted to various activities or even to major areas of responsibility.

An attempt was made to establish a qualitative evaluation of the activities of head nurses observed in this Study. The Canadian Nurses' Association undertook to review the classification of activities and indicate for each specific activity the appropriate status of nursing service personnel, that is, who should be carrying out the activity. This was done by a C.N.A. committee, and the work was reviewed in detail in Ottawa by Miss Fidler, C.N.A. Consultant on the Study, Miss Percy, Nursing Consultant in the Department, Mr. Walker and Mr. Josie of the Research Division. It is important to realize that this specification

of appropriate nurse status was done from a review of the classification and code system without reference to any of the Study data. Thus, from this standpoint at least, the allocation was objective and unbiased.

The results of this allocation of functions are shown in Appendix E, where for each specific type of activity the member of the nursing or auxiliary staff who should normally be carrying out the activity is indicated. There is also included a summary of the observed activities and time involved.

When the activities were analyzed according to this allocation it was found (Tables 22-25 and Fig. 18) that the head nurses spent about 57% of their time in activities that the C.N.A. regarded as appropriate to head nurses. About 15% of the time was spent on staff nurse duties, about 4% on nursing assistant activities, 6% on ward aide, and 17% on ward clerk duties. A small and negligible amount of time was taken up by duties appropriate to instructors and supervisors.*

Of the time involved in Patient Care activities about 58% was devoted to appropriate head nurse duties, 20% staff nurse, 5% nursing assistant, and 15% ward clerk activities. In the case of Ward Administration duties about one-third of the head nurse time was spent on activities appropriate to her status, about half the time was devoted to ward aide activities, and 16% to ward clerk duties. Most of the Personnel Administration time (73%) was spent on head nurse duties, the remainder, 27%, practically all on ward clerk duties.

^{*} All Supervision and Direction activities were considered appropriate Head Nurse functions.

The time that the head nurses spent on staff nurse duties was occupied entirely in Patient Care activities, particularly Execution - administrative and clerical, direct execution, and Education activities, in that order. The nursing assistant duties that the head nurse was observed to be carrying out were all Patient Care - direct execution activities. As might be expected, the ward aide activities being carried on by head nurses were nearly all in the ward administration group. Activities considered appropriate to the ward clerk were largely administrative and clerical activities in patient care, but included some of these duties in ward administration also.

From the standpoint of possible delegation of functions by the head nurse to her staff, the major gain would be by handing over duties to staff nurses and the ward clerk, such duties represented about 15% and 17% of her time, respectively. In both instances these duties lie mainly in the Patient Care area. As might be anticipated, some additional time may be saved by delegation of certain nursing assistant and ward aide duties in Patient Care and Ward Administration areas, respectively.*

See for comparison U.S. P H.S. Head Nurse Activities in a General Hospital references to "reassignable time".

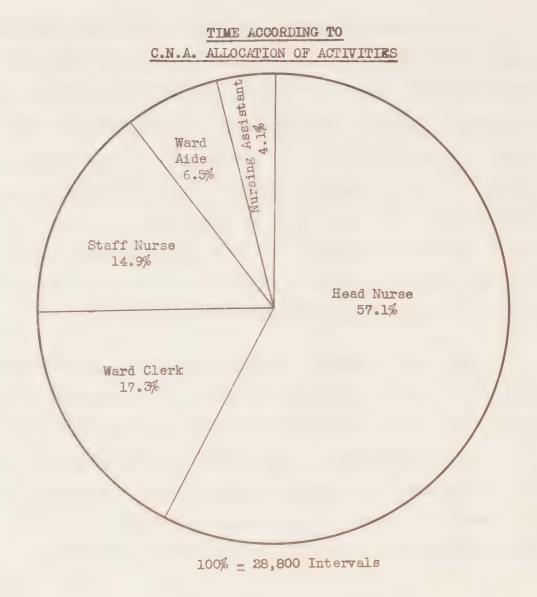


Figure 18. Percent Distribution of Time According to C.N.A. Allocation of Activities

Head Nurse Study: Data from Table 22.

Table 22

C.N.A. Allocation of Activities to Appropriate Status of Nursing Personnel

Status of Nursing Personnel	Activ		Time	
Document of Marbing Terbonner	No.	%	No.Intervals	%
Instructor	1	0.01	3	0.01
Supervisor	12	0.09	29	0.10
HEAD NURSE	7,994	56.99	16,456	57.14
Staff Nurse	1,923	13.71	4,279	14.86
Nursing Assistant	676	4.82	1,189	4.13
Ward Aide	1,040	7.41	1,864	6.47
Ward Clerk	2,382	16.98	4,980	17.29
Total	14,028	100.01	28,800	100.00

Table 23

Distribution of Activities by Area and Level According to C.N.A. Designation of Appropriate Nursing Personnel

Activity (Type)	Instructor	Supervisor	Head	Staff Nurse	Nursing Asst.	Ward Aide	Ward Clerk	Total
PATIENT CARE Management Supervision Direction Education ExecDirect ExecAdmin.&Clerical		2	667 2,083 745 - 984 1,748	296 682 945	676 -	20	1,600	669 2,083 745 296 2,362 4,293
Total		2	6,227	1,923	676	20	1,600	10,448
WARD ADMINISTRATION Management Supervision Direction Education ExecDirect ExecAdmin.&Clerical		4	151 309 208 - 15			1,020	13 310	155 309 208 - 1,048 325
Total		4	698			1,020	323	2,045
PERSONNEL ADMINISTRATION Management Supervision Direction Education ExecDirect ExecAdmin.&Clerical	1	6	57 37 17 69 636 28				459	57 37 17 70 642 487
Total	1	6	844				459	1,310
In Transit Personal			219					219
GRAND TOTAL	1	12	7,994	1,923	676	1,040	2,382	14,028

Table 24

Distribution of Time by Area and Level

According to C.N.A. Designation of Appropriate Nursing Personnel

		-						
Activity (Type)	Tratminton	יווז כן מכ כסו	Supervisor Head Murse	Staff	Nursing Asst.	Ward Aide	Ward Clerk	Total
PATIENT CARE Management Supervision Direction Education ExecDirect ExecAdmin.&Clerical Total		2	1,723 4,067	614 614 1,993 1,672	1,189	34	3,584 3,584	
	-		1269110	7,219	1,109	34	3,504	21,050
WARD ADMINISTRATION Management Supervision Direction Education ExecDirect ExecAdmin.&Clerical		12	305 564 291 - 21 29			1,830	20 563	317 564 291 - 1,871 592
Total		12	1,210			1,830	583	3,635
PERSONNEL ADMINISTRATION Management Supervision Direction Education ExecDirect ExecAdmin.&Clerical	3	15	189 68 24 672 1,167 89				813	189 68 24 675 1,182 902
Total	3	15	2,209				813	3,040
In Transit Personal			246 21					246
GRAND TOTAL	3	29	16,456	4,279	1,189	1,864	4,980	28,800

<u>Table 25</u>

<u>Percent Distribution of Time by Area and Level</u>

<u>According to C.N.A. Designation of Appropriate Nursing Personnel</u>

Activity (Type)	Instructor	Supervisor	Head Nurse	Staff Nurse	Nursing Asst.	Ward Aide	Ward Clerk	Total
PATIENT CARE Management Supervision Direction Education ExecDirect ExecAdmin.&Clerical		0.01	6.29 14.39 3.56 5.98 14.12	2.13 6.92 5.81	4.13	0.12	12.44	6.30 14.39 3.56 2.13 17.15 32.37
Total		0.01	44.34	14.86	4.13	0.12	12.44	75.90
WARD ADMINISTRATION Management Supervision Direction Education ExecDirect ExecAdmin.&Clerical		0.04	1.06 1.96 1.01 0.07 0.10			6.35	0.07	1.10 1.96 1.01 6.50 2.06
Total		0.04	4.20			6.35	2.02	12.62
PERSONNEL ADMINISTRATION Management Supervision Direction Education ExecDirect ExecAdmin.&Clerical	0.01	0.05	0.66 0.24 0.08 2.33 4.05 0.31				2.82	0.66 0.24 0.08 2.34 4.10 3.13
Total	0.01	0.05	7.67	,			2.82	10.56
In Transit Personal			0.85					0.85
GRAND TOTAL	0.01	0.10	57.14	14.86	4.13	6.47	17.29	100.00

IV. SUMMARY AND CONCLUSIONS

- 1. The basic purpose of the Study was to obtain a description of the Head Nurse functions and activities in a general hospital. The data provide a comprehensive and detailed picture of the functions and activities of head nurses observed while in charge of all types of wards (except maternity) of a large general hospital. The data also answer questions posed initially as to the frequency and duration of activities of various kinds; the activities are described in terms of area and level and about 250 specific categories. In addition, the description includes reference to the places the activities occurred and the persons, forms, equipments and supplies involved. The data are unbiased with respect to observers and head nurses. (Appendix D)
- 2. This was a pilot project and a methodology has been developed which seems adequate for the purpose, is reproducible and applicable to other studies of this kind, and with appropriate modifications, to the investigation of other members of the nursing and related staffs in general hospitals. The methodology is described in some detail in the Report and its Appendices.
- 3. Two aspects of the methodology merit special comment. First, the development of adequate classification and code systems for activities and places, persons, and equipment and supplies was an essential preliminary to the analysis of the data. The classification system for functions and activities for head nurses is systematic and detailed. It should be of considerable help in conducting other studies.

Secondly, the attention paid to the design of the Study in the initial planning stages as well as in carrying it out resulted in data adequate for the purpose of the project. The data were unbiased, representative and detailed, and of a known high degree of precision. (Appendix D).

- 4. The careful allocation of functions to the appropriate nurse status by the Canadian Nurses' Association representatives, at the request of the research group, provides a new and authoritative basis for further research in the evaluation of nursing functions.
- 5. The total observation time of 120 hours was sufficient for the description and analysis of head nurse activities. It was also possible to indicate major differences between head nurses and between wards, but not to make precise comparisons in detail for all factors. The fact that the person found to be in charge of the ward -- even if not the head nurse -- was observed at the scheduled period, resulted in a reduction of the observation time for head nurses. This proved to be no real disadvantage in obtaining the picture of head nurse activities and did add somewhat to the description of the functions of the person in charge of a ward. It would perhaps be useful to compare these activities of the substitute with her regular duties.
- 6. The overall consistency of the pattern of activity among head nurses on all types of wards is not unexpected but is significant as indicating the fundamental nature of the description presented by this Study. This similarity of work pattern has been pointed out also in the Nuffield Report.* It should serve as a sound basis for planning any changes considered necessary or advisable.

^{*} The Work of Nurses in Hospital Wards. The Nuffield Provincial Hospitals Trust. London. 1953, p. 57.

The outstanding feature of the pattern is the extremely short duration of most activities, about one-half minute or less. The U.S. Public Health Service Report also found short duration activities very common.* This seems inconsistent with the concept of the head nurse as a manager of a nursing unit. It suggests, rather, that she is not in control of the situation but that the head nurse's activities are a function of the circumstances in which she finds herself and with which she is inadequately equipped by training, experience or authority to deal. The Nuffield Report (p.137) in proposing a large area for ward organization says an essential condition for such a system is that "The ward sister shall be able to plan her day, if not completely, at any rate to a greater extent than she can at present." In this connection the Nuffield Report also points out that the number of beds had no appreciable effect on the time spent on organizational duties (p.136). This seems in line with findings of this Study respecting ward size (occupied beds) in relation to the activity pattern.

7. While the solution of this situation would seem to be a reallocation of functions so that the head nurse would have time to think and plan, this is no simple matter but raises other problems. The data indicate that the head nurse is spending about 40% of her time on functions that others should be doing. Presumably she should delegate these. Two questions arise: a) Can she delegate? Does she know how to do this and is the opportunity actually present? It is relevant here to point out that her contacts with the assistant head nurse and ward clerk - to

^{*} Head Nurse Activities in a general Hospital. Public Health Monograph No.3, U.S. Public Health Service. Washington, 1951. pp.10,15.

whomeshe might be expected to delegate activities -- accounted for only 2.2 and 3.2% of total time, respectively. Perhaps she needs to spend more time with them to make the best use of their services. The data also give the impression that the assistant head nurse functions only as a substitute and not as an assistant; perhaps there is no provision for this in the organization. If the assistant head nurse is regarded as a full-time staff nurse when the head nurse is present, she cannot be a full-time assistant and a full-time staff nurse at the same time.

b) The second question concerns the present activities of the persons to whom the head nurse might delegate activities. Are they now fully engaged in appropriate activities? If so, how could they assume further responsibilities? There is a subsidiary question analogous to that for the head nurse: Are the others, especially the ward clerk, able, in terms of qualifications, to assume these delegated duties? The Nuffield Report points out (p.137) that there is a tendency for the ward clerk to be assigned any duties "which nobody else wants". They suggest that a ward clerk should function as secretary-receptionist, not as "errand boy".

In view of the importance of this possibility of re-allocation and delegation of head nurse activities, the investigation of the functions of other members of the nursing and auxiliary staffs would seem a fruitful field for further research. They should be considered in relation to the actual and appropriate qualifications of such staff members. This applies particularly to the ward clerk.

Re-allogation of functions should not only be viewed in terms of delegation of functions by the head nurse. Perhaps she needs to be

relieved of functions and assisted more by the nursing and other administrative staff. Should not more be done by way of central planning of regular functions common to all wards; e.g., preparation of assignment and rotation schedules? It is appreciated that there are differences from ward to ward and that emergencies arise perhaps with greater frequency and more serious consequences in hospitals than elsewhere. Nevertheless administrative plans and organization must be based on consideration of the normal day-to-day program and routine of the hospital. If routine requirements are clearly and simply set out in detail, then the head nurse might be free to deal with emergencies and to plan improvements in the quality of the patient care, which is her primary responsibility.

8. Finally, the need for quantitative standards for the evaluation of head nurse activities must be emphasized. In addition to the authoritative statements of what the head nurses should or should not do, we need to know what relative amount of her time should be devoted to the approved activities. This applies also to other categories of nursing personnel and represents another field for further study.



APPENDIX A

DATA RE OTTAWA CIVIC HOSPITAL



APPENDIX A

DATA RE OTTAWA CIVIC HOSPITAL

Established 1924

1. General Information*

W.Douglas Piercey, M.D., Superintendent

For the Year Ending Sept. 30, 1951

A -- Approvals. Memberships:

- 1. American College of Surgeons
- 3. Interns A.M.A.
- 4. Interns CMA
- 5. Medical School
- 6. Nurses Training School
- 8. State Hospital Association
- 9. Blue Cross

C -- Classifications

- 14. City or Municipal
- 1. Short Term
- 3. General

F -- Facilities

- 1. Blood Bank
- 2. Cancer Clinic
- 5. Clinical Laboratory
- 6. Dental Department
- 7. Electrocardiograph
- 8. Electroencephalograph
- 9. Library, Medical
- 10. Library, Patient's
 11. Medical Records Department
- 12. Mental Hygiene Clinic
- 13. Metabolism Apparatus
- 15. Outpatient Department
- 16. Pharmacy
- 17. Physical Therapy Department
- 19. Social Service Department
- 20. X-Ray, Diagnostic
- 21. X-Ray, Routine Chest on Admission
- 22. X-Ray, Therapeutic

Beds....853 Census...724

Bassinets..80 Census....57

Admissions...21,852 Births..... 2,384 OPD Visits...22,289

Assets Fixed-Net \$4,500,000 \$5,250,000 Total

Expenditures \$1,498,262 Pay Total \$2,747,416

^{*}Source: Hospitals - Administrators Guide Issue, Vol. 26, No. 6 Part II, June 1952, p. 165.

PATIENT LOAD AND STAFF OF CANADIAN GENERAL HOSPITALS WITH MORE THAN 500 BEDS ů

Summary Data For Year Ending September 30, 1951

Name of Hospital	B e	d s Census	Bass No.	Bassinets No. Census	Admissions	Births	Personnel Paid	Int.& Res.
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Hamilton General	33.	320	142	102	26,585		000	100
Victoria (London)	617	493	50	3	12.90	1.405	22.0	15
Hotel-Dieu (Montres1)	535	136.7	. 1) (7		505	000
Royal Victoria (Montreal)	748	647	5	76	18,217	3.047	101	984
Montreal General	4	541	ST	(+) #= 1	14,285	513	1,235	290
Notre-Dame (Montreal)	· ·	589	3	39	13,2.15	1,885	721	287
Hotel-Dieu StVallier (Chicoutimi)		501	99	45	39,655	1,389	. 1	1
Winniyeg General	127	595	164	26	16,308	2,561	642	352
Reging General	753	591	9	39	12,507	1,479	645	267
University of Alberta (Edmonton)	294	5.18	30	33	10,879	894	550	210
St. Paul's (Vancouver)	556	c	65	g	I	ı	050	378
Vancouver General	,243	1,131	130	104	26,205	4,41]	1,549	562
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Administrators Guide Issue, Vol. 26, No. 6, Part II. June 1952. Hospitals. Source:

3. OTTAWA CIVIC HOSPITAL - PATIENT LOAD DATA - 1925-1951

Year	Admissions	Days' Stay	Operations	Live Births	O.P.D. Treatments
1925 1926 1927 1928 1929 1930 1931 1932 1933 1934 1935 1936 1937 1938 1939 1940 1941 1942 1943 1944 1945 1946 1947 1948 1949 1950 1951	7,082 8,229 8,752 9,115 8,988 9,673 9,617 9,208 9,659 10,221 11,088 10,737 11,109 11,628 12,213 13,570 14,330 15,644 15,892 16,179 18,354 21,154 21,932 21,704 22,320 21,852 22,425	129,365 141,265 147,719 156,076 151,370 161,436 157,797 152,950 155,649 161,565 173,259 172,424 164,943 173,141 179,321 200,564 203,820 222,967 234,640 242,322 276,795 298,442 271,030 265,938 269,196 273,110 272,056	3,594 4,027 3,904 4,106 4,045 4,166 4,489 3,867 4,326 5,040 4,997 5,066 5,478 5,945 6,139 6,415 6,726 7,375 6,758 7,172 7,521 7,821 8,255 9,186 9,809 10,183	458 467 532 598 659 753 720 725 778 846 920 977 931 953 969 1,096 1,247 1,628 1,684 1,684 2,870 2,870 2,356 2,317 2,384	8,129 10,865 11,240 10,547 11,119 13,064 15,900 20,447 31,031 30,663 26,173 26,694 26,779 30,587 30,178 28,131 30,508 31,872 30,759 20,785 28,906 38,310 40,323 41,439 41,998 46,292 47,973

Source: Twenty-sixth Annual Report, Ottawa Civic Hospital, 1950. p.26
Twenty-seventh Annual Report, Ottawa Civic Hospital, 1951.

pp. 15 and 46.

4. LOCATION OF WARDS IN OTTAWA CIVIC HOSPITAL

(Head Nurse Stations Generally at Centre of Outside Wall)

		EAST WING		
Head Nurs	<u>e</u>			Floor
10	Private	Surgical Ward		5th
9	Private	Medical Ward		4th
14	Women's	Semi-Private Surgical Ward		2nd
1	Women's	Public Surgical and Gynaecological	Ward	lst
	NORTH	Head Nurse Floor Floor Snd Centre	BOUTH	Front of Hospital
Head Nurse				Floor
11	Private S	urgical Ward		5th
7 & 8	Semi-Priv	ate Surgical Ward		4th WN & WS
6	Public Ma	le Surgical Ward		2nd WN & WS
2 & 3	Children'	s Ward WEST WING		lst

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APPENDIX B

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APPENDIX B

SELECTED BIBLIOGRAPHY

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Note: 1) The American Journal of Nursing has published lists of "Research Studies in Nursing Service and Nursing Education" with brief summaries. These appeared in the following issues:

Vol.49, No.9. pp.612-614. (Sept. 1949) Vol.50, No.3. pp.193-194. (March 1950) Vol.50, No.8. pp.512-514. (Aug. 1950)

Vol.51, No.4. pp.278-280. (April 1951) Vol.51, No.8. pp.34 adv. - 40 adv. (August 1951)

2) The American Nurses' Association Program of Studies of Nursing Functions was outlined and discussed in "Research and the ANA Program for Studies of Nursing Functions". The American Journal of Nursing, Vol.50, No.12. pp.767-770. (December 1950).



APPENDIX C

INSTRUCTIONS AND CODES



APPENDIX C - INSTRUCTIONS AND CODES

HEAD NURSE STUDY

1. (a) Information for Head Nurses

- 1. A schedule of observation periods has been provided for the two weeks, Monday to Friday, October 15-19 and October 22-26, 1951.
- 2. The schedule has been designed to meet the following specifications (which are to insure adequate coverage of Head Nurses' activities throughout the 12 hours of the hospital day):

(a) each Head Nurse will be observed for eight one-hour periods;

(b) the eight periods for each Head Nurse will cover a full twelve-hour hospital day;

(c) each Head Nurse will be observed by each of the four observers for two periods:

- (d) the observation periods are distributed randomly (within the above restrictions) throughout the two-week period.
- The observation periods are distributed so that there will be: (a) a maximum of three observation periods in a day for any Head
 - (b) a maximum of five observation periods in a day for an Observer.
- If the Head Nurse considers at any time during any observation period that the care of the patient would be jeopardized or seriously interfered with by the presence of the Observer, she will ask the Observer to stay outside the ward or room or at some appropriate distance. The Observer will do this and fill in the Activity Record subsequently by asking the Head Nurse what she was doing when she was not under immediate observation. The Observer should indicate any such circumstances clearly on the Activity Record.
- 5. The Head Nurse will not be advised, in advance, of the periods during which she will be observed. It is important that as far as practicable she carry on her activities as though the Observer were not present. The Head Nurse may, however, be asked for supplementary information or explanations and she can help by making clear to the Observer the nature of her activity where this is not evident at a distance. The continued co-operation of the Head Murse will be greatly appreciated.

Research Division, Department of National Health and Welfare, October 15th, 1951.

HEAD NURSE STUDY

1. (b) Information and Instructions for Observers

- 1. A Schedule of Observation Feriods has been prepared and it is essential to the success of our study that this schedule be followed precisely.
- 2. The schedule has been designed to meet the following specifications, (which are to insure adequate coverage of Head Nurses' activities throughout the 12 hours of the hospital day):

(a) each Head Murse will be observed for eight one-hour periods

(b) the eight periods for each Head Nurse will cover a full twelve-hour hospital day

(c) each Head Nurse will be observed by each of the four observers

for two periods

- (d) the observation periods are distributed (randomly within restrictions a,b,c) throughout the two-week period, Monday to Friday October 15-19 and October 22 to 26.
- 3. The Schedule provides for 120 observation periods (8 hrs. x 15 Head Nurses) out of a total of 1200 possible periods (10 days x 8 x 15), i.e., 1/10 observation periods available.
- . The observation periods are distributed so that:

(a) A Head Nurse will be observed for a maximum of three hours in any one day.

(b) An Observer will have a maximum of five observation reriods in one day.

5. As indicated above, it is essential to adhere to the prepared Observation Schedule. The following procedure is to be adopted when the Head Murse is not present for part or all of a specified period:

- (a) If the observation period of one hour has not been completed when the Head Nurse leaves her ward or unit for breakfast, lunch or supper, the Observer will follow her, keep stop watch going, make summary notes on any activities which would be recorded on duty, and complete the observation hour when the Need Nurse returns to her ward or unit.
- (b) If the Head Nurse is not on duty at the beginning of the period the Observer will observe the person in charge of the ward, (generally the Assistant Head Nurse but in 1st West the alternate will be Miss Nixon).

(b) (i) If the Head Nurse comes on duty during the period the Observer will then start observing her activities (with explanatory notes covering the transition interval).

(ii) If the Head Nurse comes on duty within the first 15 minutes of the period the Observer will start the observations on the Head Nurse and complete the full hour for this Head Nurse. (c) If the Head Nurse goes off duty and leaves her ward or unit, the Observer will then commence observations on the Assistant Head Nurse or on other person assuming responsibility for the ward or unit but will complete only the hour specified.

d) If the Head Nurse continues to work on the ward when she should be "off duty", the observer will note this circumstance and continue the record to the end of the period, and for a maximum

period of 15 minutes over the hour.

6. If the Head Nurse considers at any time during any observation period that the care of the patient would be jeopardized or seriously interfered with by the presence of the Observer she will ask the Observer to stay outside the ward or room or at some appropriate distance. The Observer will do this and fill in the Activity Record subsequently by asking the Head Nurse what she was doing when she was not under immediate observation. The Observer should indicate any such circumstances clearly on the Activity Record.

Research Division
Dept. of National Health and Welfare,
October 13, 1951.

2. CLASSIFICATION AND CODE FOR LOCATIONS

(Location of Head Nurse while on Duty)

- 1 Head Nurse Desk
- 2 Student Nurse Desk (alcove or counter)
- 3 Ward Clerk Desk
- 4 Nursing Supervisor's Desk
- 5 Charting Desk 6 Chart Rack
- 7 Bulletin Board
- 8 Blackboard
- 9 Nurses' Station
- 11 Medicine Cabinet (or cupboard)
- 12 Narcotics drawer or cupboard
- 13 Drug Table
- 14 Interne Desk
- 19 Rail
- 21 Supply Cupboard (or room)
- 22 Utility Room
- 23 Linen Room
- 24 Kitchen (Ward)
- 25 Refrigerator
- 26 Formula Room
- 32 Treatment Room (or examining room)
- 33 Dressing Room
- 41 Private Accommodation
- 42 Semi Private Accommodation
- 43 Public Accommodation
- 44 Pediatric Accommodation
- 45 Recovery Room
- 46 Bathroom
- 51 Corridor (own unit)
- 52 Sunroom
- 53 Balcony 54 Elevator
- 59 Halls, Stairways (outside own unit)
- 61 Nursing Office
- 62 D.V.A. Supervisor's Office
- 63 Nurses' Dining Room
- 64 Assit. Supt. (Hospital) Office
- 65 Class Room
- 66 Library (Conf. Room)

3. CLASSIFICATION AND CODE FOR PERSONS

(Staff and Other Contacts of Head Nurse)

0-9 Hospital Administration

- hospital superintendent
- hospital assistant superintendent
- 3 admitting department
- booking department
- 5 information desk 6 switchboard (exchange)
- porter, delivery boy, messenger
- 8 record office
- elevator man

10-14 Medical

- 11 doctor
- 12 interne
- 13 medical student

15-19 D.V.A. officials

- administration representative
- 16 admitting office
- 17 stenographers and clerks
- maintenance man 18
- 19 others

20-29 Nursing - Administration

- 21 director of nursing
- 22 assistant directors
- 23 assistant diretor (night)
- 24 night supervisors
- 25 nursing office (general)
- 26 nurses' residence

30-39 Nursing - School

- associate director
- 32 director of clinical experience
- 33 classroom instructors 34 clinical instructors classroom instructors

40-49 Nursing - General

- supervisor (Vcts. Pav.) 40
- 41 supervisor
- 42 head nurse
- 43 assistant head nurse
- general staff nurse 45 special nurse (private duty)
- 46 student nurses
- 49 staff (unspecified)

50-59 Nursing - (Auxiliary)

- 51 ward clerk
- 52 ward aide 53 orderly
- 54 attendant (psychiatry)
- 59 staff (unspecified)

60-79 Other Services and Departments

- 61 blood team
- 62 x-ray
- 62A deep therapy
- 63 laboratory
- 64 tumor clinic
- 65 health service 66 operating room
- 67 67 outpatient department 68 blood bank
- 69 other wards
- 71 pharmacy
- 72 dietary
- 73 physiotherapy 74 occupational therapy 75 social service
- 76 emergency
- 77 barber

81-89 Housekeeping

- 81 housekeeper
- 82 charwoman
- 83 cleaner (male)
- 84 kitchen staff (maids)
- 85 linen room staff
- 86 sewing room staff
- 87 stores

90-94 Maintenance

- 90 engineer
- 91 carpenter
- 92 painter
- 93 electrician
- 94 plumber

95-99 Others

- patient
- 96 visitors
- 97 98 clergy
- observer
- others (not specified) 99
- 100 Personal
- 101 Outside agencies

Notes: 1) Contacts by telephone -- add T to code numbers.

- 2) For multiple contacts show numbers involved -- add numbers to code as follows:
 - a) for individuals, simply the number, e.g. 44-3; this represents a contact with the third of a series of general staff nurses
 - b) for groups, the number circled, e.g., 46-5 represents a contact with five student nurses simultaneously;
 - c) for contacts with individuals belonging to more than one category, show all applicable code numbers, e.g., 11, 95. Put first the code number for the person primarily concerned in the the activity.

4. CLASSIFICATION AND CODE FOR FORMS, EQUIPMENT AND SUPPLIES

I. ADMINISTRATION

Forms

101-109	Hospital administration of patient movement
101 102 103 104 105 106 107 108 109	admission form emergency admission slip census transfer slip referral slip = 0.P.D. discharge slip discharge file death notice other N.E.S.
110-119	Mospital administration of patient care
110 111 112 113 114 115 116 117 118 119	clothing card valuables card valuables envelope record of services supplied to patients seriously ill slip nurse's casualty complaint report interme's report of accidents to patients in hospital record of wound infections record of medical oxygen and gas other N.E.S.
120-129	Staff administration
120 121 122 123 124 125 126 127 128 129	clinical assignment sheet rotation schedule daily time sheet record of nursing service daily record of special nursing service special nurse's duty slip general service nurse report student record of practical work student report of ward experience and teaching other N.E.S.

Ol2 Equipment (including instruments)

013 Supplies (excluding forms)

II. MEDICAL AND NURSING (TREATMENT)

Forms

	200-209	Unit record of patient care
	200 201 202 203 204 205 206 207 208 209	patient's chart doctor's standing orders T.P.R intake and output medications record bedside notes laboratory sheet treatment lists day and night reports kardex and memos re patient care other N.E.S.
	210-219	Other departments' records of patient care
	210 211 212 213 214 215 216 217 218 219	laboratory requisitions and reports x-ray requisitions and reports blood bank requisitions and records blood team and interne's work lists anaesthetic record and recovery notes operation and drainage sheet radium records E.C.G. requisitions and reports physiotherapy requisitions and reports other N.E.S.
	220-229	Orders and records for medications
	220 221 222 223 224 225 226 227 229	medicine requisitions narcotic drug requisitions (green) special medical requisitions medical requisition for patient being discharged (red) medicine cards or ticket drug requisitions narcotic record whisky record other N.E.S.
022	Equipment (inc.	luding instruments)
023	Supplies (excl	uding forms, drugs, medicines, and prescriptions)
024	Antiseptics, d	isinfe ct ants
025	Narcotics	

026 Drugs, medicines and prescriptions N.E.S.

027 Patients' equipment and supplies

M-945 7.54

III. MAINTENANCE AND HOUSEKEEPING

Forms

300-309	Dietary forms
301 302 303 304 305 306 307	diet card
309	other
310-319	Requisitions for supplies (excluding drugs and medicines)
310 311 312 313 314	requisition for general supplies and repairs requisition for sterile supplies requisition for food supplies requisition for laundry supplies requisition for borrowing supplies
319	unspecified or other

- 032 Dietary equipment and supplies
- 033 Laundry, bedding and linen
- 034 Housekeeping equipment and supplies
- 035 Fixtures and facilities

HEAD NURSE STUDY

5. Instructions and Codes for Keysort Card

1. Dat	te		
Recor	d	Co	de
Month	Day	Wk.	Days
Oct.	15 16 17 18 19 22 23 24	1 1 1 1 2 2 2 2	1 2 3 4 5 1 2 3
	25 26	2	4 5

- 2. Period 1-8 direct code
- 3. Observers A, B, C, D direct code
- 14. Ward 1-15 selector code
- 5. Murse observed

Code by Stat	us and O	rder -	within ward
Record	Abbrev.	Code	Order
Supervisor Head Nurse Asst. Head	S HN	1 2	1
Nurse Staff Nurse	AHN SN	3 4	1, or 2 1,2,3, or 4

- 6. <u>Place</u> 1-66 selector code
- 7. Person
 1-101 selector code
 Signal T for telephone contacts
- 8. Equipment and Supply 012-314 selector code
- 9. Activity
 Selector code
 Signal C any change during
 activity period in
 factors 6-Place,
 7-Person, 8-Equipment & Supply.
 Signal X for secondary,
 concurrent factors.
- 10. C.N.A. Allocation of Functions

Status	Code	(See p.4)
Instructor Supervisor Head Nurse Staff Nurse Nursing Asst. Ward Aide Ward Clerk	0 1 2 3 4 5 6	ing distribution in a grant and a second distribution of the second distrib

11. <u>Duration</u> (of Activity)

Selector code

03	1
m	1
200	2
X	-

HEAD NURSE STUDY

B-C.N.A. Allocation A-Activity Code No.

I - Instructor S - Supervisor H - Head Nurse SN - Staff Nurse NA - Nursing Asst S-Personnel Administration Status Code WA - Ward Aide C - Clerk H-2 H-2 H-2 0-6 9-0 9-0 9-0 9-0 A S.611 612 613 5,620 622 623 624 S.630 625 632 633 634 S.641 642 643 B 1-0 H-2 H-2 H-2 H-2 S-I H-2 H-2 H-2 H-2 H-2 ST-S H-2 S.511 512 513 513 8.130 S.150 5,170 S.420 547 542 543 543 413 S.520 521 S.141 432 S.411 S.431 4 Code for C.N.A. Allocations of Activities by Nurse Status WA-5 WA-5 NA-5 H-Ward Administration WA-5 9-0 C-6 C-6 9-0 9-0 9-0 H-2 H. 541 542 H.631 632 633 634 H°610 611 H.620 622 623 H.641 642 643 644 H.650 H.661 H.670 4 H-2-H H-2-H H-2 H-2 WA-5 WA-5 WA-5 WA-5 H-2 WA-5 WA-5 WA-5 H-2 WA-5 WA-5 WA-5 WA-5 WA-5 WA-5 H.110 H.121 H.130 н.510 123 H.141 H.150 5112 512 513 514 515 515 522 524 524 525 525 526 528 528 532 533 534 535 535 C-6 H-2 SN-3 SN-3 H-2 970 9-0 0-6 9-0 9-0 9-0 9-0 9-0 9-0 9-0 SN-3 P.640 633 634 635 635 641 P.660 662 663 664 P.670 671 672 673 F. 683 5883 5883 7488 699 999 699 SN-3 SN-3 SN-3 H-2 SN-3 NA-4 NA-4 NA-4 SN-3 NA-4 NA--4 SN-3 HH SN-3 SN-3 SN-3 H-2 H-2 NA-4 H-2 SN-3 H-2 SN-3 SN-3 0-0 P-Patient Care P.591 592 593 594 595 P. 571 572 573 574 575 P. 581 582 P.610 611 612 613 614 P.601 P.620 621 623 624 624 625 629 SN-3 SN-3 SN-3 NA-4 SN-3 SN-3 SN-3 SN-3 NA-4 NA-4 NA-4 NA-4 SN-3 NA-4 NA-4 NA-4 NA-4 SN-3 SN-3 SN-3 SN-3 SN-3 SN-3 SN-3 NA-4 NA-4 NA-4 NA -4 NA A P.520 521 522 523 524 530 532 532 534 535 535 535 542 543 544 545 9.562 2.662 2.663 541 C-Status Code No. 2 C H-2-H H-2 SLI 出品 SN-3 SIN-3 SN-3 P.111 121 P.141 P.411 412 422 423 P.431 432 433 P.501 502 503 P.511 512 513 P.421 442 P. 441

7. Notes for Coding and Punching

1. Changes

Where two or more different entries appear during one activity period for any of the factors, 6-Place, 7-Person, 8-Equipment and Supply, enter the first of each to appear even if not present at the beginning of the activity period, record the others below the corresponding place on the card, and indicate their presence by punching C (last hole on card).

2. Primary and Secondary Factors

Enter and punch as the primary factor in each instance the factor most directly and specifically associated with the activity, e.g., where the Head Nurse is using the chart and making an entry on one form, enter the specific form as the primary factor. Record secondary factors immediately below the corresponding section of the card and punch X for such secondary factors. (The first hole on that side of the card). These secondary factors are concurrent with the primary and in this respect are distinguished from the changes referred to above.

Where contact is by telephone code for persons and also mark and punch T third hole from left (#28 outer)

3. Coding and Punching Notes

- i) Show all entries in the appropriate space on the card and put dash for no entry.
- ii) Mark the holes to be punched by red stroke through the corresponding number for the hole.
 - iii) Zeros are to be punched as follows:
 - a) one zero -- outer punch
 - b) two zeros inner punch
- iv) The entries for factors 1, 2, 3, 4 and 5 will in general be the same for any one record (activity records for one observation period). These need to be entered only on the first card of the record and can be gang punched with the hand groover when all cards for the record have been completed. Coders should check the top of each page to make sure that there is no change in any of the factors from 1 to 5.
- v) It is probably most convenient to mark the holes to be punched immediately after completing the code entries on one side of the card. This saves rotating the card for this purpose as well as punching.
- vi) It is probably most convenient to punch from left to right on the bottom of the card first than to rotate the card and punch from left to right on the top of the card.

- vii) Hold the punch and the card so that the sides of the notch are straight; i.e., parallel to the end of the card; centre the punch on the hole and do not take out too much of the card. The bottom of the hole and the number corresponding to the hole should be left intact.
- viii) Check the punching visually after punching both sides of the card.
- ix) It will probably be found less fatiguing if both arms are resting on the edge of the desk with the card in one hand and punch in the other.
- $\,$ x) Number the cards consecutively from the beginning of each period.

May 15, 1952.

APPENDIX D

STATISTICAL APPENDIX



APPENDIX D - STATISTICAL APPENDIX

1. Head Nurse, Observer and Period Variation

In this Study, observations were carried on for one hour at a time. The schedule provided for eight hours of observation for each of the fifteen head nurses, a total of 120 hours. The twelve-hour hospital day was represented by eight one-hour periods and the head nurses were observed once for each of these eight periods. The observations were carried out by four observers, each assigned twice to each of the fifteen head nurses. Within these specifications, the observation periods were randomly distributed throughout the 1200 observation hours (8 per day for each of 15 head nurses for 10 days) by selecting eight random numbers as they occurred within the range 1-80 for each head nurse.* As each period was thus selected, the observer was assigned to it in order from a list of permutations of the four letters A, B, C, D.

This design incorporating the principle of randomicity ensured an unbiased representation of the head nurse's activities as far as that could be taken care of by statistical devices alone. It also made it possible to compute Standard Errors of the percentages of time involved in various activities and of the Mean Durations of activities. Since the analytical comments concerning relationships between the proportions of time spent in different activities were in general terms rather than a statistical comparison of percentages, it was unnecessary to show the standard errors throughout the tables. However, in order to provide some idea of the sampling variation in these percentages, the following table of standard errors has been prepared.

^{*} Random Numbers from Statistical Tables for Biological, Agricultural, and Medical Research. Ronald A. Fisher and Frank Yates.
Oliver and Boyd, Edinburgh. 1948. Table XXXIII.

Standard Errors of Percentages Based on Total Activities (14,028)

Proportion %	Standard Error	Proportion %	Standard Error
99.5 .5 99 1 98 2 97 3 96 4 95 5 94 6 93 7 92 8 91 9	.06 .08 .10 .12 .13 .14 .15 .16 .17	85 15 80 20 75 25 70 30 65 35 60 40 55 45 50 50	.19 .20 .21 .21 .21 .21

The sampling variation, as indicated by the standard errors, is less than 1% for all the percentages based on the total number of activities (14,028), as in Tables 3, 4, 6 and 7. In Table 3 (p.21), for example, the percentages shown for time by area have standard errors of less than 1%.

	,%	SE	3 S E range
Patient Care	75.9 £	0.21	75.3 - 76.5
Ward Administration	12.67	0.19	12.0 - 13.2
Personnel Administration	10.6 7	0.18	10.1 - 11.1
Other	0.97	0.08	0.7 - 1.1
Total	100.0		

It can be seen that sampling variation is negligible in these cases for our purpose. The probability of the time percentages lying outside the ranges indicated is 0.0027 or the chances are 369 to 1 against this occurring. For individual head nurses the number of activities was about 1,000, so the standard errors here will be about 0.21 - 0.79%.

The design followed for the schedule of observations also enabled us to investigate the variation in the number of activities between head nurses, between periods, and between observers. By using the analysis of variance technique, we find that:

- i) There is no statistically significant variation between observers in respect to number of activities observed (and re mean duration since observation time is equal for all periods).
- ii) There is no statistically significant variation between head nurses in respect to number of activities observed.
- periods; most of this seems to be associated with the relatively smaller number of activities observed during Period 1 (7 to 8 A.M.) and Period 6 (4.30 to 5.30 P.M.).

¹ See following pages 110-113.

^{2 5%} level (Snedecor's F test).

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Analyses of Variance - Activities by Head Nurses and Observers Number of Activities by Observer for Each Head Nurse

Head Nurse	Period		Obser	rver		Total	Mean Activities/
No.	Observed	A	В	C	D	Activities	Nurse
1	i	95	129	151	89	11001110100	Narbe
***	ii	132	137	136	118		
	Sum	227	266	287	207	987	123.5
2	i	1.18	1.50	53	121		
	ii	137	72	17	133		
	Sum	255	231	70	254	810	101.2
3	i	94	138	138	108		
	ii	79	14)	102	132		7761
1.	Sum	173	278	240	240	931	116.4
4	i	134	90	123	134		
	ii	288	206	264	230	988	123.5
-	Sum			168		900	163.)
5	i	110	130 132	136	137 74		
			262			1000	107.0
	Sum	246		304	211	1023	127.9
6	i	117	125	1.32	113		
	ii	128	137	103	92	01.77	770 1
	Sum	245	262	235	205	947	118.4
7	i	97	119	132 136	95		
	Sum	222	239	268	239	968	121.0
8	i	101	139	134	98)00	100
	ii	142	127	138	109		
	Sum	243	266	272	207	988	123.5
9	i	152	131	140	63		
	ii	141	81	115	135		
	Sum	293	212	255	198	958	119.8
10	i	139	122	102	107		
	ii	106	141	128	115		
	Sum	245	263	230	222	960	120.0
11	i	132	85	132	127		
	ii	110	127	110	134		
	Sum	242	212	242	261	957	119.6
12	i	86	93	112	97		
	ii	104	113	127	95		
	Sum	190	206	239	192	827	103.4
13	i	96	102	102	1		
	ii	126	85	120	107		
	Sum	222	187	222	108	739	92.4
14	i	150	115	129	120		
	ii	143	91	139	113		
	Sum	293	206	268	233	1000	125.0
15	i	129	120	119	109		
	ii	113	129	123	103		220
	Sum	242	249	242	212	945	118.1
Total		3626	3545	3638	3219	14028	
Mean		120.8	118.2	121.3	107.3		116.9

Analysis of Variance

I. Head Nurse and Observer Differences

Sums of Squares

1.	Correction term, $C = (\frac{14,028}{4x15x2})^2 =$	1,639,873
2.	Total sum of squares = $[(95)^2 + (132)^2 + \dots + (103)^2] - C =$	75,101
3.	Sub-classes (Individual Obs.&H.N.) = $(227)^2 + (255)^2 + \cdots + (212)^2 - C =$	46,369
	Within Sub-classes = 2 - 3 =	28,732
	Between Head Nurses = $\left[(987)^2 + (810)^2 + \dots + (945)^2 \right] - C = 4x2$	11,123
6.	Between Observers =	3,857
7.	Interaction (Head Nurses x Observers) = 3 - (5+6) =	31,389

Analysis

Source of Variation	Sum of Squares	Degrees of Freedom	Mean Squares
Between Head Nurses	11,123	14	794.5
Between Observers	3,857	3	1285.7
Interaction (H.N. x Obs.)	31,389	42	747.4
Residual (Error)	28,732	60	478.9
TOTAL	75,101	119	
Interaction + Residual	60,121	102	589.4

Test of Significance -- "F" Ratio*

Interaction	=	74 7. 4 478.9	=	1.56	Not Significant (F (.05) = 1.58)
Head Nurses	=	794·5 589·4	=	1.35	Not Significant (F (.05) = 1.79)
Observers	Ξ	1285.7 589.4	=	2.18	Not Significant (F (.05) = 2.70)

^{*} Snedecor, Statistical Methods. Fourth Edition. Table 10.7.

Analysis of Variance - Activities by Head Nurses and Periods

Nurse
Head
Each
for
Day
of
Time
by
Activities
of
Number

Mean No.	Acti- vities	123.4 123.4 123.5 123.5 123.5 123.5 123.5 123.5 123.5 123.5 123.5 123.5 123.5 123.5 123.5	
Total		8877 9473 9473 1000 1000	14028
	Φ	151 168 168 138 139 104 129	1729
	7	132 132 134 134 120 120 127 127 113	1817
	9	118 72 79 110 132 103 103	1630
(Period No.	5	129 133 123 123 125 126 120 120	1802
of Day (Period	†	1337 1337 1338 1338 1338 1338 1338 1338	1879
Time	3	95 108 116 136 125 141 127 107 107	1802
	2	136 138 137 1339 1339 1339 1339 1339 1339 1339	1892
	-	88 48 48 48 48 48 48 48 48 48 48 48 48 4	1477
Head	No.	1 0 m 4 5 0 0 0 1 0 m 4 5 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Total Mean

II. Head Nurse and Period Differences

Sums of Squares

1. Correction term,
$$C = (\frac{14,028}{15x8})^2 = \frac{1,639,873}{15x8}$$

2. Total Sum of Squares $(89)^2 + (136)^2 + \dots + (129)^2 - C = \frac{75,101}{3}$. Between Head Nurses = $(\frac{987}{2} + (810)^2 + \dots + (945)^2 - C = \frac{11,123}{8}$

4. Between Periods = $(\frac{1477}{2} + (1892)^2 + \dots + (1729)^2 - C = \frac{9,065}{15}$

5. Residual = $2 - (3 + 4)$ = $54,913$

Analysis

Source of	'Variation	Sum of Squares	Degrees of	Freedom Mean Squares
Between He	ad Nurses	11,123	14	794.5
Between Pe	riods	9,065	7	1295.0
Residual	(Error)	54,913	98	560.3
	Total	75,101	119	

Test of Significance - "F" ratio

Head Nurses =
$$\frac{794.5}{560.3}$$
 = 1.41 Not Significant (F from tables 1.79, 2.26)

Periods = $\frac{1295.0}{560.3}$ = 2.31 Significant at 5% level (F from tables 2.10, 2.82)

D-I. Number and Duration of Activities by Observer

	No.	Duration 1	Intervals
Observer	Activities	Total	Mean
A B C D	3626 3545 3638 3219	7200 7200 7200 7200	1.99 2.03 1.98 2.24
Total	14028	28800	2.05

D-II. Activities by Area of Activity and Observer

Area of Activity	Observer				m-+-3
Area or Activity	A	В	C	D	Total
Patient Care Ward Administration Personnel Administration Total ²	2642 647 270	2640 451 378	2 7 21 489 367 3638	2445 458 295 3219	10448 2045 1310 14028

D-III. Time Involved in Activities by Area of Activity and Observer

Area of Activity	Observer				mote ?
	A	В	C	D	Total
Patient Care Ward Administration Personnel Administration	5431 1182 509	5522 796 800	5459 752 915	5446 905 816	21858 3635 3040
Total ²	7200	7200	7200	7200	28800

D-IV. Percent Time Involved in Activities by Area of Activity for Each Observer

Area of Activity	Observer				m-+-3
	A	В	C	D	Total
Patient Care Ward Administration Personnel Administration Total ²	75.43 16.42 7.07	76.69 11.06 11.11	75.82 10.44 12.71	75.64 12.57 11.33	75.90 12.62 10.56

¹ Duration and Time expressed in Intervals of 15 seconds.

²Total includes 225 other activities amounting to 267 intervals.

Level of Activity					
	A	В	С	D	Total
Management Supervision Direction Education Execution Direct Admin. & Clerical Other In Transit Personal Total	207 605 252 78 (2,417) 1,113 1,304 (67) 67	244 604 236 107 (2,278) 968 1,310 (76) 74 2	228 590 243 119 (2,397) 1,157 1,240 (61) 59 2 3,638	202 630 239 62 (2,065) 814 1,251 (21) 19 2	881 2,429 970 366 (9,157) 4,052 5,105 (225) 219 6

D-VI. Time Involved* in Activities by Level of Activity and Observer

Level of Activity		(T) / 2			
	A	В	C	D	Total
Management Supervision Direction Education Execution Direct Admin. & Clerical Other In Transit Personal Total	472 1,134 321 174 (5,021) 2,223 2,798 (78) 78	655 1,183 345 283 (4,652) 1,996 2,656 (82) 77 5	646 1,177 336 452 (4,515) 2,064 2,451 (74) 66 8 7,200	546 1,282 338 380 (4,621) 1,709 2,912 (33) 25 8	2,319 4,776 1,340 1,289 (18,809) 7,992 10,817 (267) 246 21 28,800

D-VII. Percent Time Involved in Activities by Level of Activity and Observer

Level of Activity					
	A	В	C	D	Total
Management Supervision Direction Education Execution Direct Admin. & Clerical Other In Transit Personal Total	6.56 15.75 4.46 2.42 (69.74) 30.87 38.86 (1.08) 1.08	9.10 16.43 4.79 3.93 (64.61) 27.72 36.89 (1.14) 1.07 0.07 100.00	8.97 16.35 4.67 6.28 (62.71) 28.67 34.04 (1.03) 0.92 0.11	7.58 17.81 4.69 5.28 (64.18) 23.74 40.44 (0.46) 0.35 0.11	8.05 16.58 4.65 4.48 (65.31) 27.75 37.56 (0.93) 0.85 0.07

^{*}Time expressed in intervals of 15 seconds.

APPENDIX D

2. Status of Nurse Observed

In this Study the object of observation was to be the Head

Nurse - the person in charge of a ward or unit. Instructions to Observers

(Appendix C) were to observe the head nurse, but when the head nurse was

off duty for some reason the person actually in charge of the ward at the

time was to be observed; this was usually the assistant head nurse but

occasionally a supervisor or a staff nurse was in charge for some time.

It was considered that this policy of strict adherence to the schedule

would provide the most representative and unbiased picture of head nurse

activities. It would also throw some light on the amount of time she was

not present and the activities of her substitute.

Data for the activity and time relationships according to the nurse actually observed are shown in Tables D.VIII-XIV, inclusive. For nearly 50% of the time the head nurse herself was present and observed; about pas-quarter of the time the assistant was in charge; about 12% a staff nurse, and 5% a supervisor. Since the observation periods were randomly distributed over the ten days this is rather an interesting sidelight on the duty hours of the head nurse.

It was important to know, of course, whether this would seriously affect our observations based on analysis of the data. We have discussed mostly differences in percentage of time involved in activities of various kinds by area and level, and so on. Our data now show that there was no practical difference in the activity pattern for head nurses themselves as compared with that for all nurses observed. Differences were usually within 1% of the time or a maximum of about 3%.

The only differences worth noting are that the assistant head nurse and staff nurse spent a somewhat greater proportion of the time in patient care than did the head nurse and less in personnel administration, as might be expected. The supervisor, on the other hand, spent a great deal more time in management activities than did the head nurse. The latter devoted more time to management and supervision and less to execution than the assistant head nurse and staff nurse. It is of some interest that the assistant head nurse spent considerable time in execution - administrative and clerical.

The comparison of head nurse time with total time for all nurses observed is, however, the significant one here; differences between head nurses and specific other categories must be interpreted with caution since the observation time for the latter was small, and no observations were planned for these categories. Therefore they may not be representative of their activities when replacing the head nurse and probably are not representative of their functions when acting in their usual capacities.

D-VIII. Number and Duration of Activities by Status of Nurse Observed

Status of Nurse	No.	Duration	(Intervals)	Percent Dis	tribution
Observed	Activities	Number	Mean	Activities	Time
Supervisor Head Nurse Asst. Head Nurse Staff Nurse	696 8,145 3,652 1,535	1,440 16,560 7,440 3,360	2.07 2.03 2.04 2.19	4.96 58.06 26.03 10.94	5.00 57.50 25.83 11.67
Total	14,028	28,800	2.05	99.99	100.00

D-IX. Activities by Area of Activity for Each Status of Nurse Observed

Status of Nurse		of Ac		Total ²
Observed	Patient Care	Ward Admin.	Personnel Admin.	
Supervisor Head Nurse Asst. Head Nurse Staff Nurse Total	497 6,042 2,795 1,114	99 1,203 494 249	84 780 302 144 1,310	696 8,145 3,652 1,535

D-X. Time Involved in Activities by Area of Activity for Each Status of Nurse Observed

Status of Nurse	Area	of Ac	tivity	Total ²
Observed	Patient Care	Ward Admin.	Personnel Admin.	10041
Supervisor Head Nurse Asst. Head Nurse Staff Nurse	1,073 12,225 5,937 2,623	191 2,108 852 484	157 2,084 578 221	1,440 16,560 7,440 3,360
Total	21,858	3,635	3,040	28,800

D-XI. Percent Time Involved in Activities by Area of Activity for Each Status of Nurse Observed

Status of Nurse	Area	of Ac	tivity	Total ²
Observed	Patient Care	Ward Admin.	Personnel Admin.	Total
Supervisor Head Nurse Asst. Head Nurse Staff Nurse	74.51 73.82 79.80 78.07	13.26 12.73 11.45 14.40	10.90 12.58 7.77 6.58	99.99 99.99 100.00 100.00
Total	75.90	12.62	10.56	100.01

¹Duration and time expressed in Intervals of 15 seconds.

²Total includes 225 other activities amounting to 267 intervals.

Activities by Level of Activity for Each Status of Nurse Observed D-XII.

Г				
	Grand	Total	696 8,145 3,652 1,535	225 14,028
	Other		120 120 61 88	
		Total	382 5,246 2,450 1,079	9,157
t. v	Execution	Admin.& Clerical	149 2,895 1,408 653	5,105
t 1 v ;		Direct	2,351 1,042 1,26	4,052
of Activity	Education		36 216 87 27	366
Level	sion Direction		66 601 224 79	970
	Supervision		127 1,418 647 237	2,429
*	e .	ment		881
Status of	Nurse	Ubserved	Supervisor Head Nurse Asst.H.Nurse Staff Nurse	Total

Time Involved* in Activities by Level of Activity for Each Status of Nurse Observed D-XIII.

ſ				
	Grand		19 1,440 143 16,560 73 7,440 32 3,360	28,300
	Other		143	267
		Total	667 10,488 5,213 2,441	18,809
+ v	Execution	Admin.& Clerical	291 5,876 3,130 1,520	10,817
Activity		Direct	376 4,612 2,083 921	7,992
OFACT	at		65 912 247 65	1,289
Level	Direction		89 819 311	1,340
	Manage- Supervision		233 2,841 1,184 518	4,776
	Manage-	ment	367 1,357 412 183	Total 2,319
Status of	Nurse	Observed	Supervisor Head Nurse Asst.H.Nurse Staff Nurse	Total

Percent Time Involved in Activities by Level of Activity for Each Status of Nurse Observed D-XIV.

*Time expressed in Intervals of 15 seconds.



APPENDIX E

COMPLETE CLASSIFICATION AND CODE SYSTEM FOR ACTIVITIES

APPENDIX E COMPLETE CLASSIFICATION AND CODE SYSTEM FOR ACTIVITIES

1. Number of Activity Code Items by Area, Level, and Groups

Area	P - Pati	ent Care	H - Ward	Admin.		nnel Admin.
	Group	No.	Group	No.	Group	No.
Level		Items		Items		Items
MANAGEMENT 100-199 Total 32	P.110-9 120-9 130-9 140-9	4 4 4 2	H.110-9 120-9 130-9 140-9 150-9	2 4 1 2 1	S.110-9 120-9 130-9 140-9 150-9 160-9 170-9	(1) 1 2 1 (1) 1 8
10021 32			- \		2 1 2 2 2	
EDUCATION 400-499 Total 22	P.410-9 420-9 430-9 440-9	3 3 2 12	H.410-9 420-9	(1) (1)	\$.410-9 420-9 430-9	1 3
EXECUTION - DIRECT 500-599	P.500-9 510-9 520-9 530-9 540-9 550-9 560-9 570-9	3 4 5/ 10 10/ 9 6/ 2 7	H.510-9 520-9 530-9 540-9 550-9	8 9 6 2 3	5.510-9 520-9 530-9 540-9	4 4 3 5
Total 103	590-9	59		28		16
EXECUTION CLERICAL & ADMIN. 600-699	P.600-9 610-9 620-9 630-9 640-9 650-9 660-9 670-9 680-9	3 8 7 6 3 7 10 4 5	H.610-9 620-9 630-9 640-9 650-9 660-9 670-9	4 7 4 4 3 1	s.610-9 620-9 630-9 640-9	3 6 5 3
Total Execution 200		112		55		33
TOTAL BY AREA GRAND TOTAL254 2 256		138		67		49
Total Groups 59		27		17		15

Note: 1) Items in brackets are activities in the classification which were not observed at any time.

- 2) Additional 2 items to Grand Total are for: 300 Personal Activities
 - 200 Unallocated time, in transit, etc.
- 3) / sign indicates existence of sub-divisions of code for specific activities.

According to the Complete Classification System and C.N.A. Allocation of Activities 2. Summary of Activities and Time Involved AFFENDIX E

			Total	al	Sunemicion	cion	1 +0 0 %	1
Code No.	Description	C.N.A	Acti	Thi ma	Actini	1070	Darre.	clon Elon
		filoc #	ties	דדוום	ties	Time	Activi-	Time
P.100-699	PATIENT CARE (NURSING)		10.448	25.05.0	2006	7 7 7	2 4 5	
P. 100-199	WANIACHINE Construct of			200	2006	4,7,64	C#7.	1,0%
P-110-9	Anslvais		699	1,815	1	1	ı	ı
P.111	analyzing and evaluating the kind and amount of		17	214	ı	ı	1	1
		(
112	identifying nursing problems needing study and	•dne	ગ	R	1	1	1	1
	co-operating in their solution	Š						
113	assisting in the study of methods of nursing send	•ďnc	1	1	1	1	1	1
	continuous improvement	Ç						
114	assessing the supplies of drugs and medicines	•dro	ı	1	1	1	1	1
		И	02	0,0				
P.120-9	Planning and co-operation	0 270	000	S.L.S.	ı	1	ı	1
P.120	planning nursing care of patients	N	466	120	ŧ	ı	1	1
121	planning with the medical staff for the care	• 17 • 17	-1	ი ი	ı	ı	ı	ı
		H	106	A 72 N	-			
122	planning for the assistance required by the		000	7.04	ı	1	ı	ı
	members of the medical staff and other profes-							
	with							
	patient's total ne	H.N.	200	20				
123	planning with nursing staff for care of patients	H.N.	202	345	l (ł	1	1
P.130-9	ursing care		200	06.00	1 (ı	ı	1
P.131	providing for the administration of treatment)		1	ı	1	1
	and medications ordered by the medical staff	H.N.	1					
132				I	ı	ı	1	1
	the treatments carried out by nurses and of the					-		
222	nursing care of patients	H.N.	23	Ŋ	1	1	ı	
707								
	and offering nonformance (December prompt							
	Schedule and olinios seriamont when	F F			_	_		
134		, N. H	121	603	ı	1	ı	1
	connel with those of t			_				
	nursing personnel in the unit in the interest							
	nt care	И	*	6				
P.140-9	Conferring with the administration about		∄ 4	7	ł	1	1	1
	nursing needs and special problems		ΔA	150				
P.141	initiated by the	H.N.	4	129	1 1	1	1	1
146	consultations initiated by the Head Nurse	H.N.	2	62	! 1	i	ı	1
				2	1	1	1	1

C.N.A. Activi- Time	valuate) ions and activities ing S to the appropriate other sections of the	nstruct) ivities involving ons, orders, or idea by adding D to the item under other	rehabilitate, demonstrate) 319 648 10 16 13 18	Iness and treatment 137 310 2 2 3 5	37 87 1 1	S.N. 24 52	S.N. 76 171	<u>patients</u> 18 47 3 7 4 5 1 5 1 5 1 5 1 1	S.N. 1 3	S.N. 9 27 3 7	exercise S.N. 7 12 - 1	of health 151 253 3 5 6	S.N.	activities S.M. 70 105 2 2 6	tivities S.N. 19 30	13 38 2	\$ 4	_
Description	E73	DIRECTION Functions and activities involimmediate directions, orders, assignments are coded by addinappropriate code item under ot sections of the classification	EDUCATION (teach, explain,	Advising patient regarding illness and	re medications	re nature of illness		Assisting in the rehabilitation of parassisting patient with erooming	assisting patient with hobbies	assisting patient with walking	assisting patient with other physical		regarding	regarding physical	advising patient regarding social act:	Advising patient's family re patient	patient's condition	care of patient
Code No.			P.400-499	P.410-9	P.411	412	413	P. 420-9	422	423	424	P-430-9	P.431	432	433	P-440-9	P.441	442

C.N.A.	Antimi	tur.	2 2 2 4	-		
11000	TATOOW	TIME	Activi	1,1me	Activi-	Time
	ties		ties		ties	
	9,460	19,397	2,073	4,128	732	1,007
	4,103	7.906		2,197	555	270
	995	1,720		58	D.	2
H.N.	522	891	233	24	1	1
H.N.	363	678	17	24	D	2
H.N.	110	151	6	10	1	1
	259	1,021	es	2	4	ಬ
S.N.	68	236		1	1	1
S.N.	63	282	es.	रथ	લ્ય	જ
S.N.	167	503	1	8	ಣ	83
	159	331	44	94	30	42
S.N.	Н	٢	1	1	1	1
S.N.	44	144	6	35	7	10
S.N.	59	88	31	45	18	24
N.A.	4	S	1	1	_	~
N.A.	21	93	4	9	4	2
	1			L (ę r	t
	/T/	1,462		608	797	2002
2	_	-				
	1	1	1	4		
S.N.	103	291	99	174	2	6
S.N.	353	969	217	201	112	155
S.N.	148	286	41	78	11	15
S.N.	112	188	63	105	37	54
S.N.	ı	1	1	ı	ı	1
procedures	265	361	120	168	08	101
N.A.	122	16	Φ ;	LZ	4	4 (
N.A.	64	83	22	62	9	10 C
N.A.	122	13	4	4	9	2
N.A.	43	09	KS	36	18	24
N.A.	43	09	æ	40	I	14
N.A.	ω	16	4	വ	1 0	-d 1
N.A.	9	2	n	4	1	20
N.A.	56	78	15	ର	22	31
N.A.	٦	<u>ಷ</u>	7	જ	1	1
N.A.	8	26	7	16	2	œ
# 0000 00022 0 000000 W 22222222	H S S S S S S S S S S S S S S S S S S S		259 299 63 1167 1159 1103 1148 1128 1128 1128 1128 1138 1148 1148 1159 1159 1159 1159 1159 1159 1159 115	259 1,021 29 236 63 2882 167 503 159 331 1 1 44 59 88 44 144 59 88 103 291 25 51 1 12 188 12 86 12 86 12 86 12 86 12 86 12 86 12 86 13 43 15 60 64 83 64 83 60 60 64 83 60 60 64 83 60	259 1,021 2 29 236 282 2 167 282 2 167 282 2 159 236	259 1,021 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2

			The second secon	Total	al	Supervision	sion	Direction	tion
Allocoting cout special nutring procedures S.M. 195 166 544 81 Injections & transfusions(intravenous & interstitial) S.M. 19 210 100 176 16 Injections & transfusions(intravenous & interstitial) S.M. 19 210 100 176 16 Injections & transfusions(intravenous & interstitial) S.M. 19 42 10 20 4 S.M. 10 10 10 10 10 S.M. 10 10 10 10 10 S.M.	Code No	Description	C.N.A.	Activi-	Time	Activi-	Time	Activi-	Time
Carrying out special nursing procedures S.N. 1.19 1.1 1.			Alloc.	ties		ties		ties	
Control of Special nursing procedures (gen. & unspec.) S.N. 19 210 10 11 11 11 11 11 1	P_550_9	Carrying out special nursing		375	760	286	277	ام	1 90
injections & trenstraions(intrevenous & interstitia) infections & trenstrations(intrevenous & interstitia) interstitution gating congene and dreinege S.N. 26 128 21 29 39 S.N. 15 51 10 32 S.N. 15 10 51 10 32 S.N. 15 10 104 42 39 Diversing and dreined structs Divert care for petient's well-being N.A. 37 104 32 10 20 S.N. 37 104 32 10 A.A. 17 10 10 A.A. 17 10 10 A.A. 18 10 10 A.A. 19 10 10 A.A. 19 10 10 A.A. 10 10 A.A. 10 10 10 A.A. 10 1	P.550	cerrying out special nursing procedures (gen.	S.N.	2 -		202	+ -	5 1	1 100
S.N. 55 128 41 98 95	551	transfusions(intravenous & inte	S.N.	119	210	100	176	16	24
S.N. 29 58 22 39 4 Greening exygen and carbon dioxide S.N. 15 51 10 32 37 Greening oxygen and carbon dioxide S.N. 67 104 43 59 20 S.N. 67 104 83 110 32 S.N. 67 104 83 113 15 S.N. 67 104 84 65 S.N. 68 14 4 6 S.N. 68 14 8 6 S.N. 68 18 18 10 S.N. 68 18 18 18 S.N. 68 18 18 18 S.N. 68 18 18 2 S.N. 68 18 1 2 S.N. 68 18 18 1 S.N. 68 18 1 2 S.N. 68 18 1 2 S.N. 68 18 18 1 S.N. 68 18 18 1 S.N. 68 18 1 2 S.N. 68	552	suction and drainage	S.N.	56	128	41	98	0	17
S.N. 19 45 10 20 4	553		S.N.	83	58	22	39	4	4
Exemeval of clips and sutures dreassings remenval of clips and sutures dreassings remenval of clips and sutures propoperative preparations(incl. sterile preps.) S.W. 677 104 43 59 10 10 10 10 10 10 10 10 10 10 10 10 10	554	giving oxygen and carbon dioxide	S.N.	19	43	10	8	4	0
S.N. 67 104 45 59 20 50	555	removal of clips and sutures	S.N.	15	21	10	32	(t)	ري دي
Direct care for perientions (incl. sterile preps.) S.N. 57 61 19 28 15 10	556	dressings	S.N.	67	104	43	59	20	23
N.A. 37 61 19 28 15 28 Direct care for petient's well-being N.A. 74 100 47 65 24 Certing petient N.A. 77 100 47 65 24 Certing petient N.A. 78 86 8 15 7 N.A. 19 28 15 28 Reving petient N.A. 35 86 8 15 7 N.A. 19 28 15 7 N.A. 19 28 15 7 Reving petient confortable N.A. 390 729 4 4 2 Attachments the petient confortable N.A. 390 729 4 4 2 Attachments with femily and friends S.N. 82 14 19 26 3 Certe or beiled of petient Directed etc.) N.A. 151 187 81 15 10 Certe or beiled of petient's wait(making bed, etc.) N.A. 151 187 81 15 15 Certe or beiled of petient's possessions S.N. 85 144 5 5 5 Certe or petient Directed N.A. 30 44 5 5 5 Directing petient's interests N.A. 30 44 5 5 5 Directing petient's interests N.A. 30 44 5 5 5 Directing petient's must of drugs N.A. 30 44 5 5 5 Directing petient Directing procedures N.A. 30 44 5 5 5 Directing petient Directing petient and others N.A. 21 36 12 2 4 Directing petient Directing room wards N.A. 22 36 44 2 5 5 Directing the petient Directing room N.A. 23 36 44 2 5 5 Directing the petient Directing room operating room N.A. 34 36 36 36 36 36 36 36	257		S.N.	32	104	02	91	10	
Direct care for partient's well-being N.A. 14 26 1,104 92 135 55 65 Dething patient N.A. 77 104 47 55 65 Aresing patient N.A. 77 105 47 65 25 Aresing patient N.A. 19 28 8 15 7 Aresing patient N.A. 19 28 8 15 7 N.A. 1 1 1 2 4 5 N.A. 19 28 4 4 5 N.A. 19 28 19 20 4 N.A. 19 28 19 20 4 N.A. 19 28 19 20 4 N.A. 19 28 19 10 N.A. 19 28 19 10 N.A. 19 28 19 19 N.A. 19 28 19 19 Other or belight comfortable N.A. 19 18 19 19 Other or belight of patient comfortable N.A. 19 18 19 19 Other or belight of patient's unit (making bed, etc.) N.A. 19 19 19 Other or the patient's unit (making bed, etc.) N.A. 19 19 19 Other or the patient's unit (making bed, etc.) N.A. 19 19 19 Other or the patient's interests N.A. 19 19 19 19 Other or the patient's interests N.A. 19 19 19 19 Other or the patient's interests N.A. 19 19 19 19 Other or patient's interests N.A. 19 19 19 19 Other or disease patient and others N.A. 19 19 19 19 Other or disease patient and others N.A. 19 19 19 19 Other or and from operating room N.A. 19 19 19 19 Other or and from operating room N.A. 19 19 19 19 19 Other or and from operating room N.A. 19 19 19 19 19 Other or and from other depts. N.A. 19 19 19 19 19 19 Other or and from other depts. N.A. 19 19 19 19 19 19 Other or and from other depts. N.A. 19 19 19 19 19 19 19 1	559	other	S.N.	37	61	19	28	15	22
N.A. 14 26 9 80 4 N.A. 14 26 9 80 4 N.A. 19 26 10 47 65 25 Greesing and undressing patient N.A. 19 28 4 5 N.A. 19 28 4 5 5 A.A. 19 28 6 7 2 A.A. 19 28 19 28 A.A. 19 28 19 28 A.A. 19 28 3 A.A. 19 38 A.A.	P.560-9	Direct care for patient's well		636	-	200	133	53	64
N.A. 77 100 47 65 23	P.561		N.A.	14	26	0	8	4	4
N.A. 25 85 85 15 7	562	caring for elimination	N.A.	27	100	47	63	23	88
dreesing and undressing patient N.A. 19 28 4 4 5 shaving patient mental hygiene of patient advising the patient comfortable S.N. 45 58 6 7 2 S.N. 45 58 6 7 2 Care for the patient re privileges and conditions S.N. 423 713 61 102 76 Care for the patient's unit(making bed, etc.) N.A. 131 187 8 13 20 S.N. 85 184 22 42 12 S.N. 85 184 22 42 12 S.N. 85 184 22 42 12 S.N. 86 184 22 42 12 S.N. 86 184 22 42 12 S.N. 86 184 22 42 12 S.N. 87 109 3 11 2 M.A. 36 44 3 5 3 Droctection from disease(patient and others) N.A. 36 44 3 5 3 Droctection from disease(patient and others) Droctection from disease(patient and others) Loanying the patient M.A. 88 13 8 2 Awithin the ward to and from operating room N.A. 88 13 8 2 Awithin the ward to and from operating room N.A. 88 13 82 3 Awithin the ward to and from operating room N.A. 88 12 8 8 2 Awithin the ward to and from operating room N.A. 88 12 8 8 2 N.A. 88 12 8 8 2 M.A.	563	feeding patient	N.A.	35	82	Φ	15	7	Φ
N.4. 1 1 -	564	dressing and undressing patient	N.A.	19	88	4	4	2	4
N.A. 390 729 - 5 5	565	shaving patient	N.A.	Н	٢	1		-	7
making the patient comfortable N.A. 49 68 14 20 4 edvising the patient re privileges and conditions S.N. 45 58 6 7 2 Care on behelf of patient care for the patient's unit(making bed, etc.) N.A. 151 187 8 7 16 7 2 care for the patient's unit (making bed, etc.) N.A. 151 187 8 14 20 7 7 7 glving ettention to patient's possessions S.N. 85 184 22 42 18 20 3 11 20 7 4 4 20 3 11 20 7 4 4 20 3 11 20 7 4 4 20 3 11 20 3 11 20 4 4 20 3 4 4 3 4 4 3 4 4 3 4 4 4 4 4 4	566	mental hygiene of patient	N.A.	290	729	ı	1	ಬ	S
advising the petient re privileges and conditions other other care for heatlef of petient care for the petient's unit(making bed, etc.) s.N., 82, 141 19 26 76 relationships with femily and friends giving attention to patient's possessions giving attention to patient's possessions s.N., 85 184 22 42 12 strong for patient's interests looking for patient marketing interests looking for patient marketing interests looking for patient marketing procedures procedutions in use of drugs for others) looking the patient: moving the ward transfers between wards to and from operating room n.A., 225 353 162 253 55 to and from operating room n.A., 246 25 388 35 to and from operating room n.A., 246 25 388 35 to and from orbit depts. n.A., 249 24 42 56 n.A., 240 25 n.A., 240 2	267	the patient comfortable	N.A.	49	89	14	20	4	9
Other S.N. 8 9 4 2 Care on behalf of patient Care on behalf of patient W.A. 131 187 8 9 4 2 care for the patient's unit(making bed, etc.) N.A. 131 187 8 13 20 giving attention to patient's interests S.N. 85 184 22 42 12 protecting patient's interests N.A. 36 44 22 42 12 incoking for patient's interests N.A. 36 44 22 42 12 nocking for patient's interests N.A. 38 44 3 35 4 carrying on preventing lights N.A. 49 81 2 4 protection from disease(patient and others) N.A. 49 81 2 4 moving the patient: Moving the patient: N.A. 225 36 4 3 4 within the ward N.A. 2 3 4	268	ing the patient re privileges and	S.N.	43	58	9	2	જ	cs.
Care on behalf of petient Total care for the patient N.A. 131 187 8 13 20 relationships with family and friends S.N. 85 141 19 26 3 3 4 18 18 26 3 3 11 2 3 11 2 4 18 3 4 18 3 4 4 3 4 4 3 4 4 3 3 4 4 3 4 4 3 4 4 3 3 4 4 3 3 4 4 3 3 4 4 3 3 4 4 3 3 4 4 3 3 4 4 3 3 4 4 3 3 4 4 3 3 4 4 3 4 4 4	269	-	S.N.	ω	6	4	4	ಣ	23
care for the patient's unit(making bed, etc.) N.A. 151 187 8 15 20 relationships with family and friends S.N. 85 141 19 26 3 giving attention to patient's interests S.N. 85 184 22 42 12 protecting patient's interests N.A. 30 48 6 7 4 looking for patient Inching on preventive nursing procedures N.A. 38 44 3 35 4 Carrying on preventive nursing procedures H.N. 49 81 2 4 Protection from disease(patient and others) S.N. 49 81 2 4 Protection from disease(patient and others) N.A. 225 353 4 2 4 Moving the patient: N.A. 22 35 4 2 4 Within the ward N.A. 28 45 25 35 4 to end from other depts. N.A. 29 47	P.570-9			423	713	19	102	92	66
S.N.	P.571		N.A.	131	187	ω	13	20	29
giving attention to patient's possessions S.N. 85 184 22 42 12 protecting patient's interests S.N. 57 109 3 11 2 looking for patient Interests N.A. 36 44 3 3 4 answering lights Carrying on preventive nursing procedures N.A. 49 81 2 4 4 3 35 4 Carrying on preventive nursing procedures protection from disease(patient and others) H.N. 49 81 2 2 4 4 3 35 4 4 3 35 4 4 3 35 4 4 3 35 35 3 35 35 35 35 3 3 4 4 3 3 3 3 4 4 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3<	572		S.N.	88	141	19	56	23	3
protecting patient's interests S.N. 57 109 3 11 2 looking for patient w.A. 30 48 6 7 4 answering lights N.A. 38 44 3 35 4 35 35 Carrying on preventive nursing procedures N.A. 49 81 2 2 4 protection from disease(patient and others) H.N. 49 81 2 2 4 procautions in use of drugs Moving the patient: -	573	giving attention to patient's possessions	S.N.	82	184	222	42	CZ T	16
No.A. 30 48 6 7 4 4	574	protecting patient's interests	S.N.	22	109	23	11	ಣ	3
answering lights N.A. 38 44 3 35 35 Carrying on preventive nursing procedures H.N. 49 81 2 2 4 protection from disease(patient and others) H.N. 49 81 2 2 4 precautions in use of drugs S.N -	575	looking for patient	W. A.	30	48	9	2	4	2
Carrying on preventive nursing procedures 49 81 2 4 protection from disease(patient and others) S.N. - <t< td=""><td>276</td><td>enswering lights</td><td>N.A.</td><td>38</td><td>44</td><td>to.</td><td>10</td><td>33</td><td>41</td></t<>	276	enswering lights	N.A.	38	44	to.	10	33	41
protection from disease(patient and others) H.N. 49 81 2 4 precautions in use of drugs S.N. - <th< td=""><td>P.580-9</td><td>Carrying on preventive nursing proce</td><td></td><td>49</td><td>81</td><td>es.</td><td>હ્ય</td><td>4</td><td>11</td></th<>	P.580-9	Carrying on preventive nursing proce		49	81	es.	હ્ય	4	11
Precautions in use of drugs S.N.	P.581	protection from disease (patient and	H.N.	49	81	€	ભ	4	11
9 Moving the patient: 225 353 162 253 55 within the ward N.A. 21 36 12 23 55 transfers between wards N.A. 8 13 5 8 2 5 to and from operating room N.A. 28 45 25 38 3 to and from other depts. N.A. 34 56 18 26 15 admissions N.A. 29 47 24 42 5 discharges N.A. 82 125 67 100 13	582	precautions in use of drugs	S.N.	1	1	1	ı	1	1
within the ward transfers between wards N.A. 21 36 12 23 5 transfers between wards N.A. S.N. 8 13 5 8 2 to and from operating room N.A. 28 45 25 38 3 to and from other depts. N.A. 34 56 18 26 15 admissions N.A. 89 47 24 42 5 discharges N.A. 82 125 67 100 13	P.590-9	Moving the patient:		225	353	162	253	55	88
transfers between wards N.A. 8 13 5 8 2 to end from operating room S.N. 28 45 25 38 3 to end from X-ray N.A. 23 31 11 16 12 to end from other depts. N.A. 34 56 18 26 15 admissions N.A. 82 47 24 42 5 discharges N.A. 82 125 67 100 13	P.591		N.A.	12	36	12	23	ಬ	ω
to and from operating room S.N. 28 45 25 38 3 to and from other depts. N.A. 23 31 11 16 12 admissions N.A. 29 47 24 42 5 adischarges N.A. 82 125 67 100 13	269	transfers between wards	N.A.	ω	13	വ	ထ	લ્ય	લ્ય
to end from X-rey to end from other depts. N.A. 23 31 11 16 12 to end from other depts. N.A. 34 56 18 26 15 admissions N.A. 29 47 24 42 5 discharges N.A. 82 125 67 100 13	593	to and from operating room	S.N.	83	45	25	38	ro.	2
to and from other depts. N.A. 34 56 18 26 15 Redmissions	594	and from X-rey	N.A.	23	31	11	16	12	15
admissions N.A. 29 47 24 42 5 discharges N.A. 82 125 67 100 13	595	and from other	N.A.	34	56	18	26	15	88
discharges N.A. 82 125 67 100 13	296	admissions	N.A.	68	47	24	42	വ	വ
	269	discharges	N.A.	88	135	67	100	13	23

A. Activi- Time ties 5,357 11,491 421 642 142 230 258 381 21 31 293 1,579 293 1,579 293 240 48 87 1138 252 199 340 55 83 50 45 115 195 219 409 699 126 259 219 409 699 126 259 2100 21 22 225 235 245 139	Activi- Time ties 887	Activi Tim ties 177 233 11 11 15 10 10 10 10 10 10 10 10 10 10 10 10 10
Receiving orders from medical staff receiving orders from the doctor reading doctor's standing orders from the doctor receiving report of doctor's orders from: Receiving information re patients from: Receiving report of doctor's orders from: Receiving report of doctor's orders from: Receiving information re patients from: Receiving report from nursing staff Receiving recording of symptoms, conditions, causes Reades Reades Receiving report from nursing staff Receiving report from nursing staff Receiving report from nursing staff Receiving recording or symptoms, conditions, causes Recording on chart Receiving report from nursing staff Receiving recording or symptoms, conditions, causes Recording or condition received Receiving recording from other departments Receiving information from other departments Recording information from other departments Recording warder antries Receiving warder antries Receiving warder staff Receiving warder staff Receiving warder staff Receiving recording information from other departments Receiving warder survies Receiving warder staff Receiv	448	
Receiving orders from medical staff receiving verbal orders from the doctor reading doctor's standing orders or prescriptions receiving report of doctor's orders from staff Receiving information re patients from: muspedified source medical staff muspedified source muspedifi	6,1	
Receiving orders from medical staff reaching orders from the doctor stading orders from the doctor stading orders from the doctor stading orders or prescriptions S.N. 258 381 Receiving information re patients from: H.N. 293 1,579 cher departments there is a staff cher departments and etc.) Receiving information re patients from: L.N. 293 1,579 cher departments there is a staff cher departments and etc.) Receiving information re patient from staff cher departments cher departments and etc.) Receiving information re patient from nursing staff cher departments conditions, causes conditions, causes conditions, causes checking or conditions, causes checking information re patient causes conditions, causes checking information repatient causes causes checking information repatient causes causes checking information from other departments causes causes checking information from other departments causes checking information from other departments causes checking information from other departments causes	4 %	
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receiving doctor's standing orders or prescriptions Receiving report of doctor's orders from staff Receiving report of doctor's orders from staff muspecified source medical staff cother departments karder	4 %	0
Receiving report of doctor's orders from staff Receiving information re petients from: Receiving information re petients from: Recording to correct of a correct of	4 %	
Hecelving information re patients from: unspecified source much staff much staff cther departments kardex kardex patient's records notebook (calendar pad, etc.) patient's recording of symptoms, conditions, causes recording on chart nurake and output aneachetic recovery notes nurake and output aneachetic recovery notes nemos on rounds re symptoms, etc. Recording information re patient recording doctor's orders (verbal) recording information from other departments (e.g., lab. reports) making kardex entries making wardex entries making wardex entries making wardex entries making wardex entries making out day and night reports making out day and night reports	04 65 8 9 9 9	
medical staff mursing staff other departments kardex musting staff other departments kardex mursing staff h.N. 295 H.N. 48 H.N. 138 87 H.N. 139 87 87 87 87 87 87 87 87 87 8	4 %	
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cother departments kardex kardex kardex patient's records notebook (calendar pad, etc.) patient's records notebook (calendar pad, etc.) patient's records patient's records receiving report from nursing staff Direct recording of symptoms, conditions, causes recording on chart T.P.R. bedside notes nemes on rounds re symptoms, etc. Recording information re patient recording information from other departments (e.g., lab. reports) meking kardex entries meking wardex entries meking wardex entries meking out day and night records kardex H.N. 138 825 60 100 115 115 126 127 126 127 127 127 127 127	4 0 7	H
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receiving report from nursing staff Direct recording of symptoms, conditions, causes recording on chart T.P.R. bedside notes Intake and output anguesthetic recovery notes Intake and output anguesthetic recovery notes memos on rounds re symptoms, etc. Recording information re patient recording information from other departments (e.g., lab. reports) making kardex entries making wardex entries making vout day and night records receiving out day and night records S.N. 45 529 699 728 115 72 815 H.N. 1 29 738 1,715 making wardex entries making ward night records making ward night records		
Direct recording of symptoms, conditions, causes recording on chart T.P.R. bedside notes intake and output ansasthetic recovery notes memos on rounds re symptoms, etc. other Recording information from other departments (e.g., lab. reports) making kardex entries making out day and night records.		
recording on chart T.P.R. Tecording information from other recording information from other recording kardex entries (e.g., lab. reports) making kardex entries making vardex entries recording out day and night recording recording from other making vardex entries recording recording cot day and night recording such as a series of the condition of the condi		
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general and unspecified S.N. 2 5		7
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			Total	al .	Supervision	sion	Direction	tion
Code No.	Description	C.N.A.	Activi- ties	Time	Activi- ties	Time	Activi- ties	Time
0 680 0	West-ing andone directions and sasionments for							
1	unit staff re:		336	848	55	97	23	23
P.651	medications (incl. medicine cards)	ບໍ	177	420	17	23	લ્ય	લ્ય
652	diet (incl. special orders for ward kitchens)	ပံ	14	26	23	7	ı	ı
653	routine care of patient (e.g. P.540-9, 560-9)	O	4	86	H	21	1	ı
654	special services for patients (e.g., P.550-9)	H.N.	44	274	27	42	٦	7
655	CD	H.N.	252	83	1	જ	ı	ı
656	movement of patients in and out of ward	ပံ	8	ı	ı	1	1	1
629	other	ပံ	લ્ય	ભ	લ્ય	63	1	1
P.660-9	Writing orders and requisitions and making arrang							
	ments re services involving persons not on unit staff		1,139	2,726	348	732	901	142
P.660	professional services, general and unspecified	ບໍ	જ	જ	ı	1	1	ı
199	medical staff including interne service	ບໍ	160	266	88	41	വ	r _C
662	blood team or blood bank	ບໍ	184	492	53	156	10	15
663	medications (from pharmacy)	ບໍ	228	497	19	123	82	33
664	laboratory procedures	ပံ	276	738	82	148	32	40
665	x-ray procedures	ບໍ	99	140	20	33	10	14
999	appointments for clinics, treatments and operations	ပံ	63	135	26	38	63	ω
667	special duty nurse	ပံ	23	72	10	83	લ્ય	83
899	diet	င်	143	375	67	191	15	21.
699	other	ပီ	4	O	٢	60	-1	K.
P.670-9	Assembling and maintaining information re patients		457	290	41	f:S	883	1 1
P.670		ບໍ	4	9	٦	N,	1	Ŕ
671	filing records	ပံ	215	272	11	1	4	co.
672	making patient's records available to those entitled							
	to them	ບໍ	122	145	00	10	IC.	2
673	looking for records	ຍໍ	116	167	27	31	19	24
P.680-9	Giving information re patient to:		816	2,216	14	22	23	വ
P.681	medical staff	S.N.	325	555	വ	2	1	1
682	nursing staff	H.N.	266	416	H	ಬ	1	1
683	other departments	H.N.	33	24	જ	2	~	Н
684	family and friends of patients	H.N.	46	6	9	Φ	જ	4
685	giving report to nursing staff	H.N.	146	1,091	1	1	1	ı

			Total	al	Supervision	sion	Direction	tion
Code No.	Description	Alloc.	Activi- ties	Time	Activi- ties	Time	Activi- ties	Time
E.100-699	WARD AIMINISTRATION (NON-NURSING)		2,045	3,635	309	564	208	291
H.100-199	MANAGEMENT (analysis, planning		157	524	હ્ય	7	1	1
H-110-8	Planning the maintenance of a confortable, orderly, clean and safe environment for patients		ď	5	-	ĸ		
H.110	planning for a suitable environment for patients	H.N.	0 4	2	- 1	ו כ	1	1 1
111		H.N.	1 00	0	pos	ונו		1 1
H.120-9	Planning for supplies and equipment		84	152	4 ~) N	1	ı
H.121	planning for the securing of supplies & equipment	H.N.	रु	36	1	1	ı	1
122	planning for the distribution of supplies & equipment	H.N.	53	9	1	1	ı	ı
123	for the	H.N.	37	62	Lead	જ	1 0	ı
764	providing for the conservation and economical use	2	66	OV			į,	
H.130-9	the	0 17 0 17	33	O.F	ı	1 '	ľ	1
	rel administrati		4	12	1		1	
н.130	co-ordinating the services of other departments		•	1				
P 140-9	With Work of the Ward	odno.	4	122	ı	1	ı	1
C-07-7-47	housekeeping needs and housekeeping problems		24	74	1	ı	1	1
H.141	consultations initiated by the administration	H.N.	19	57	ı	1	1 1	1 1
142	by th	H.N.	ಬ	17	1	1	1	i
H.150	planning for proper use of accommodation	H.N.	30	177	1 1	1 1	1 1	1 1
	SUFERVISION (check, review, evaluate) Supervisory functions and activities are coded by adding S to the appropriate code item under other sections of the classification.							
	DARECTION (assign, order, instruct) Functions and activities involving			*				
	immediate directions, orders, or assignments are coded by adding <u>D</u> to the appropriate code item under other					į		
	sections of the classification.							
H. 400-499	EUUCATION (teach, explain, demonstrate)		ı	1	ji I	1	1	ı
H.410-9	Teaching and demonstrating principles of good management		1	1	1	ı	ı	ı
H. 420-9	Teaching and demonstrating principaes of preventive							
	measures		-	1	1	-	-	-

SECULION (cerrying out) Alloo, title Fige F	-			Total	It	Supervision	Slon	Direction	tion
Alloc, ties 1488 5.311 507 559 508	Code No.	Description	C.N.A.	Activi-	Time	Activi-	Time	Activi-	Time
Secretarion to general marking supplies and disposing of supplies securing and disposing of percenting and disposing of percenting and disposing of supplies and equipment formating form			Alloc.	ties		ties		ties	
1,427 2,473 224 391 155 20	H.500-699			1,388	3,311	307	557	208	291
Observing & maintening proper physical endrowmer incl. W.A. 141 779 57 36 36 36 36 36 36 36 3	H.500-599	Ward		1,427	2,473	224	391	155	211
Care of the general ward surroundings W.A. 63 128 14 20	H.510-9	1		441	9779	57	96	36	56
oure of currents station. care of chursing station w.A. 111 162 27 16 27 16 27 16 27 16 27 16 20 16	H.510	of the general ward surroundings	W.A.	~	es.	-	०र	1	1
our of the property of the pro	211	of sick room incl.equipment, (making	W.A.	63	128	14	30	17	26
W.A. 78 107 16 27 4	512		W.A.	111	168	8	1	-	
### 144 65 2 3 3 1 8 1 ### 14 65 2 5 5 5 ### 14 65 2 5 5 5 ### 1 1 3	513	of	W.A.	78	107	16	27	4	2 ا
### attention to general sanitation ## attention to general sanitation ## attention to general sanitation ## attention to secident and fire heards ## and other	514	care of utensils and supplies	W.A.	142	303	23	31	ω	14
## attention to accident and fire hezerds A. A. B.	515	attention to general sanitation	W.A.	44	65	હ્ય	23	Ŋ	2
Securing and disposing of supplies and equipment securing and disposing of supplies and equipment securing and disposing of laundry supplies and equipment securing and disposing of laundry supplies W.A. 45 10 17 5 6 5 5 79	516	attention to accident and fire hazards	H.N.	Н	53	1	1		. tO
Securing, maintaining, storing and distributing and distributing and disposing of laundry supplies and equipment w.A. 478 68 20 37 37 8 8 17 8 8 18 18 8 18 8 18 8 18 8	519	other	H.N.		20		23		1
securing and disposing of supplies and equipment securing and disposing of leaday supplies W.A. 45 68 100 96 162 79 securing and disposing of leaday supplies W.A. 8 13 4 8 - 5 17 securing and disposing of food supplies W.A. 8 15 4 8 - - 5 17 8 - <td></td> <td>storing and</td> <td></td> <td></td> <td></td> <td></td> <td>,</td> <td></td> <td></td>		storing and					,		
Securing and disposing of supplies and equipment W.A. 43 68 20 32 17 5 5 5 5 5 5 5 5 5		supplies and equipment		724	1,160	96	162	43	102
Securing and disposing of laundry supplies W.A. 10 17 5 8 5	H.521	securing and disposing of supplies and equipment	W.A.	43	68	20	53	17	22
securing and disposing of food supplies securing and tetrmined supplies - other departments W.A. 35 53 20 35 11 1 securing the services of personnel for maintenance of facilities securing the services of personnel for maintenance of facilities securing the services of personnel for maintenance W.A. 24 39 8 17 1 1 1 1 Other Checking distributing, and storing nursing supplies other Checking counting) supplies and equipment W.A. 26 48 38 15 15 15 10 11 1 1 1 1 1 1 1 1 1 1 1 1	522	and disposing of	W.A.	10	17	വ	ω	വ	0
securing and returning supplies - other departments W.A. 35 53 20 35 11 1 securing the services of personnel for maintenance W.A. 24 39 8 17 1 2 2 1 1 2 2 2 2 2 1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 4 2	523	and disposing	W.A.	Φ	13	4	Φ	1	ı
securing the services of personnel for maintenance of facilities W.4. 24 39 8 17 1 2 24 38 18 2 24 38 18 2 24 38 18 2 38 18 2 38 18 2 38 18 2 38 18 2 38 18 2 38 18 2 38 18 2 38 18 2 38 18 2 38 18 2 38 18 38 18 38 18 38 18 38 18 38 18 38 48 38 48 38 48 38 48 38 48 38 48 38 48 38 48 38 48 38 48 38 48 38 48 38 48 38 48 38 48 38 48 38 38 48 38 48	524	and returning supplies - other	W.A.	35	53	8	35		14
of facilities securing, distributing, and storing nursing supplies "A.A. 24 39 8 17 1 " " " " nousekeeping " W.A. 204 415 24 38 18 15 15 15 15 15 15 15 15 15 15 15 15 15	525	the services of personnel							
Securing, distributing, and storing nursing supplies W.A. 76 138 8 15 15 15		of facilities	W. A.	24	39	Φ	17	Н	p
W.A. 76 138 8 15 15 2	526	distributing, and storing nursing	W.A.	204	415	24	38	18	S
other Ot	527	" housekeeping	W.A.	26	138	ω	15	15	02
Other Weak 2 2 - 1 Checking contined because stations of checking stations and equipment checking stations and equipment stations and equipment checking continuous and linear checking housekeeping supplies W.A. 2 - - 1 2 - 1 2 - - 1 2 - <td>528</td> <td>" " office</td> <td>W. A.</td> <td>322</td> <td>415</td> <td>7</td> <td>6</td> <td>11</td> <td>14</td>	528	" " office	W. A.	322	415	7	6	11	14
Checking (counting) supplies and equipment W.A. 10 22 1 2 3 1 1 1 1 1 1 1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	529		W. 4.	જ	CV2	8	1	Н	Н
checking sterile supplies W.A. 10 22 1 2 - <th< td=""><td>H.530-9</td><td>and</td><td></td><td>46</td><td>108</td><td>2</td><td>34</td><td>er.</td><td>ಣ</td></th<>	H.530-9	and		46	108	2	34	er.	ಣ
checking general nursing supplies and equipment W.A. 26 48 3 8 1 checking laundry and linen W.A. 1 1 1 2 23 1 checking laundry and linen W.A. 1 1 1 1 2 2 3 1 checking lood supplies C. 2 4 2 4 2 2 3 1 Prevaring supplies W.A. 6 7 1 1 2 2 3 3 Alstributing menus W.A. 6 7 1 1 2 3 distributing menus W.A. 6 7 1 1 2 3 Looking for keys 1 1 1 1 2 2 3 1 2 Looking for housekeeping supplies and equipment W.A. 64 107 14 7 3 100king for housekeeping supplies and equipment W.A. 33 51 <td>H.531</td> <td></td> <td>W.A.</td> <td>10</td> <td>22</td> <td></td> <td>જ</td> <td>1</td> <td>ı</td>	H.531		W.A.	10	22		જ	1	ı
checking laundry and linen W.A. 6 32 2 23 1 checking housekeeping supplies W.A. 1 1 1 - <td>572</td> <td>general nursing supplies and</td> <td>W.A.</td> <td>58</td> <td>48</td> <td>20</td> <td>ω</td> <td></td> <td>Н</td>	572	general nursing supplies and	W.A.	58	48	20	ω		Н
checking housekeeping supplies W.A. 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 3 4 7 3 3 3	553		W.A.	9	325	હર	23	П	~
checking food supplies W.A. 1 <td>534</td> <td></td> <td>W. 4.</td> <td>Н</td> <td>~</td> <td>ı</td> <td>ı</td> <td>1</td> <td>ı</td>	534		W. 4.	Н	~	ı	ı	1	ı
checking office supplies C. 2 4 - <td>535</td> <td></td> <td>W.A.</td> <td>-</td> <td>٦</td> <td>~</td> <td>rl</td> <td>1</td> <td>1</td>	535		W.A.	-	٦	~	rl	1	1
Prevaring and serving diets (regular meals)	536		ಲೆ	જ	4	1	1	1	ı
distributing menus W.A. 6 7 1 1 - serving trays Looking for equipment and supplies and equipment C. 102 245 45 71 21 looking for nursing supplies and equipment W.A. 64 107 14 20 14 looking for housekeeping supplies and equipment W.A. 53 51 4 7 3	H.540-9	4		108	252	46	72	21	30
serving trays We.A. 102 245 45 71 21 Looking for housekeeping supplies and equipment C. 11 16 - - - looking for nursing supplies and equipment W.A. 64 107 14 20 14 looking for housekeeping supplies and equipment W.A. 53 51 4 7 3	H.541	distributing menus	W.A.	9	2	Н	-	1	ı
Looking for keysC.1116looking for nursing supplies and equipmentW.A.64107142014looking for housekeeping supplies and equipmentW.A.3351473	542	trays	W. A.	102	245	45	7.1	21	30
looking for keys looking for nursing supplies and equipment looking for housekeeping supplies and equipment W.A. 33 51 4 7 3	H.550-9	7		108	174	18	27	17	21
looking for nursing supplies and equipment W.A. 64 107 14 20 14 looking for housekeeping supplies and equipment W.A. 33 51 4 7 3	H.551	for keys	ڻ ن	11	16.	1	1	1	1
looking for housekeeping supplies and equipment W.A. 35 51 4 7 3	552	for nursing supplies and equip	W.A.	64	107	14	20	14	18
	553	for housekeeping supplies and	W. A.	33	51	4	7	53	23

H.600-699 Adm H.610-9 Mak H.610 rec 611 dai			Total	-	Supervision	sion	Direction	tion
0	Description	C.N.A.	Activi-	Time	Activi-	Time	Aotivi-	Tine
0		Alloc.	ties		ties		ties	
	Administrative and olerical functions							
	re ward administration (non-nursing)		461	853	80	166	10	80
	Making out records of patient movement		65	1 %	23	20		•
		٦	3 -	3 -	-1 -	9 5	0	d ⁰
	3	• 5 c	1 60	1 9	-1 ¢	1 9	1 4	
		ه د	22 (76	3	946	-1	N3
	ATTO TOTAL	ပီ (00	24	H	-1	-	-
	disonarge slip	ပံ	r N	IQ QI	O	12	H	-
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9	re recor		G C	10	ю	90	19	4
		ບໍ	-	1	8	0		- 8
		周	8	8	8	0	1	
622 dee	death records	ບ	es.	6	0,	0	1	. (
623	accident reports	H	4	2 00	2	8 6	-	ାଚ
624 Con	Complaint reports	H	8		4 1	B (4 1	3
625 not	notifiable disease report	1 0	0	•	-) b		3
629 ether	1. C	, ,	s <	- 6	1 1	9 1	•	8 (
O.	4	•	2 1	1.7	-1		N	LQ.
	The state of the reduisions for supplies and equipment		36	249	a	43	10	00
		ပီ	75	196	15	34	٦	~2
	rannory supplies	ပံ	דו	00	ref	10	62	ы
	rood supplies	ຶ່ນ	10	LQ.			. 8	
	borrowing supplies	Ü	9	O	BG	4	~	96
H.640-9 Giv	Giving and receiving information relating to equipment and))	•	0	3	>
			146	182	М	a	*	q
	giving information re equipment and supplies	ů,	4.3	(C))	0 (> (
	t e	ບ	44	PC PC	4	Q	85	*
	giving and receiving information re keys	, c	22	98	٠,-) (-)	H C
	giving and receiving information about accommodation	0	N	80		1 1	1 1	3 (
H. 650-9 Giv	information regard	,	ì))))
	policy, regulations, and layout		73	115	4	20	8	ĸ
H.650 giv	giving general and unspecified information regarding				•		l	
	hospital layout and policy	ວ	7	10	0		01	ĸ
	giving location of patients to the public	ຶ່	25	60		-		1
652 giv	giving hospital regulations re visiting hours to the	')		1		
	public	ບ	25	36	N	8		
	receiving information re hospital regulations	A	16	63	4	O		8
0	rms, records		74	118	28	64	O.	20
H.661 med		ů			2 8	4 1	3 -	3 -
662 nur	nursing staff		1 [1 4	4	l M		-1 &
	other departments		1 0	D F	di c	D (Ø1 :	Ω :
61	Recording information about equipment and supplies	• 1	20	101	22	9	70	44
H-670		ALL I	٦,	1-	1 1	8 8	1 (
	200	1		•		j		

Description							
	C. No.A.	Activi-	Time	Activi-	Time	Activi-	Time
PERSONNEL ADMINISTRATION	00071	1310	3040	37	68	17	24
		57	189	ı			
nd evaluating figure of the state of the sta		1	6	ŧ	ı	ı	1
Planning methods of evaluating and dealing with criticisms of staff		ı	1	ı	8	1	
Assisting in the planning for teaching medical and nursing							
in the property of the propert		7	8	1	8	•	
planning for in-service education of medical and	N	4	00			•	
nursing personmet		- 89 22	9 80	1 6	1 8		8
consultations initiated by the administration	H	17	45	8	1	8	
consultations initiated by the head nurse	H	8	23	8	ł		8
Planning the assignment of staff in the light of		8	E C			ا	1
personal factors and considerations	NG.	3 0	200	1 (1	1 1	1 1
planning assignment of stari in light of parsonal lactors	=	0 1	3 8				8
Figuring methods of communication with Staff Darticination		4	40		1		
planning social activities involving staff participation	HIN	4	4	1	8	8	1
SUPERVISION (check, review, evaluate) Supervisory functions and activities are coded by a to the appropriate code item under other sections o	adding S.	S. classification.	or.				
DIRECTION (assign, order, instruct) Functions and activities involving immediate directions, orders, or assignments are coded by adding D to the appropriate code item under other sections of the classification.	ons, ord	orders, or	8.				
EDUCATION (teach, explain, demonstrate)		75	683		63	10	10
Participate in the teaching of nursing personnel	, 1	54	180		Т	~3	B 3
mal classroom teaching	н	8		ŧ			8
formal ward teaching	→ 6	l t	122	• -	-	l 6	8 M
	ā -	3 -	- 10	4 8	4 8	2 8	
Supervision of examinations, reading papers, eve-	4	•					
of staff nurses	NG		N CH	1 (1 1	1 1	1 1
the content of the two contents of the said shill the	1	1 00	2002		0	-	~
oblinical and nursing	H	14	42		3 1	4 8	2 8
administrative	EN	-	-	8	1	8	t
the state of the s		1				_	•

		TOTAL	71	DOISTA19dnc	TOTS	DILECTION	lon
Description	C.N.A.	Activia	Time	Activi-	Time	Activi-	Time
P .		1178	23.68	36	65	14	19
Soll							
service		et et	0	8	C	q	8
Counselling unit staff regarding work, status, etc.		2 6	7 20		35 9	g1 (> {
rk standards		•	2				3
individual staff members	HON	2	19	89	ı	8	B
discussing personal plans, privileges and problems							
with individual staff members	H	O	22	8	1	8	6
discussing problems of pay, employment status, hours							
of work, etc., with individual staff members	Supa	2	14	8	8		
april	la la)	8		})	3
staff members	HIN	-	63	0	8	9	1
Maintaining good relationships with hospital staff		360	564	8	8		1 1
looking after the interests of hospital personnel	HIN	-	2	0	8	. 6	1
977	HN	24	6	9	1	ĵ	ı
greeting hospital personnel	H	113	138	1	8	8	8
	A	241	405	0	0	8	8
873							
gnments		225	298	4	9	-	-
hours of duty, meals, etc.	A	121	191	1	1		1 -
patient assignments	N. C.	19	99	1	1		1 8
olasses, appointments, lectures, etc.	A	53	77	4	9	1	8
Orientation of hospital staff		42	214	10	10	63	60
orientation of hospital staff, general &unspecified	H	ю	10	80) b(3) II
hospital policy and regulations	Sup	7	gmd		1	8	ı
ward layout and services	'A	12	64	8	1	_	•
staff characteristics and relationships	H	N	2	1	0	1 8	P 1
patient characteristics (including introductions)	HIN	24	144	ı		c	

S 600-699			The Person of th					DILECTION
		CN.A	Activia	Time		July mo	100	
	d.	Alloc	ties	O THE			ties	1120
	Administrative and clerical functions		525	970	28	20	0.	10
	relating to nersonnel				2		7	7
	repairing some recording discussions)		41	S.	1	1	8	
	records of graduate nurse staff	A	1	8	á	B	3	ı
	records of student nurse staff	HIN	80	4	1		1	
613 r	records of auxiliary nursing staff	H)	- A	1		١,	I
8_620=Q		1	4	4	1	ı	8	2
	weet til and appraising criticisms, complaints,	_						
	and commendations regarding performance by							
	members of staff;		2.4	84	1	-	1	
S.620 s	staff, general and unspecified	LIN	3 N CI) C)	B	•	1
621	graduate nurses		0 8	4 1	1	8	1	1
			9	17	2		8	8
		H	p-rel	4		1	1	8
	auxiliary nursing personnel	NEI NEI	O	32	8		1	1
	medical personnel	HN	4	0	1			
625	other departments or wards		4 -	1	1		0	8
S.630-9 W	Working with routing personnel records	NT T	1 10	0 0		8 1	1	1
	ARCOND RECORDS GOVERN TO THE SECOND S	₹	0	240	9	S	4	2
	Forsomier records, Seneral and unspecified	ပ	H	7		1	7	~
		Ö	48	198	တ	18	1	8
	To and out book	ಲ	~	2	-	_	1	8
	other routine records	ಲ	7	18	83	4	2	8/3
	Looking for personnel records	Ö	7	21	10	10	_) _
2°640-9	Giving or obtaining information re location or))	ł	4
	movements of staff		432	641	2.	2.0	a	C
Se641 1	looking for staff	Ü	243	400	0 0	3 0	0 (~ t
642 r	receiving information re location and movements	•	0	204	71	22	0	
		۲	86	101	1			
643		5 (2 .	TOT		3	8	1
	The state of state of state	၁	111	131	~	Н.	8	
-200	IN TRANSIT, ETC.	EN	219	246	١	-	1	
		i		2	ı)	1	•
-300 	PERSONAL ACTIVITIES	H	9	21	1	1		1
Total			14028	28800 2429	2429	4778	970	1340
44								

Sup. - Supervisor

HN - Head Nurse

S.N. - Staff Nurse

N.A. - Nursing Assistant

W.A. - Ward Aide

C - Ward Clerk

APPENDIX F

ACTIVITIES AND TIME BY WARD GROUPS



APPENDIX F - ACTIVITIES AND TIME BY WARD GROUPS

F-1. Number and Duration of Activities by Ward Status

Ward Status		No.	Duration	(Intervals)
	Ward Nos.	Activities	Total	Mean
Private Semi-Private Public Veterans Pediatrics	9,10,11 4,7,8,14,15 1,5,6 12,13 2,3	2,875 4,889 2,957 1,566 1,741	5,760 9,600 5,760 3,840 3,840	2.00 1.96 1.95 2.45 2.21
Total	1-15	14,028	28,800	2.05

F-2. Activities by Area of Activity for Each Ward Status

		Ward	Sta	tus		
Area of Activity	Private (9,10,11)	Semi-Private (4,7,8,14,15)		Veterans' (12,13)	Pediatrics (2,3)	Total (1-15)
Patient Care Ward Administration Personnel Administration	2,099 366 353	3,740 660 424	2,107 576 232	1,152 236 147	1,350 207 154	10,448 2,045 1,310
Tota 12	2,875	4,889	2,957	1,566	1,741	14,028

F-3. Time Involved in Activities by Area of Activity for Each Ward Status

		Ward	Sta	tus		
Area of Activity	Private	Semi-Private (4,7,8,14,15)			Pediatrics (2,3)	Total (1-15)
	(9,10,11)	(4, (,0),14,12)	(1,7,0)	(12,13)	(2,3)	(1-17)
Patient Care Ward Administration	4,390 588	7,613 1,083	4,151	2,801 495	2,903 376	21,858 3,635
Personnel Administration	719	825	465	507	524	3,040
Tota 12	5,760	9,600	5,760	3,840	3,840	28,800

F-4. Percent Time Involved in Activities by Area of Activity for Each Ward Status

		Ward				
Area of Activity	Private (9,10,11)	Semi-Private (4,7,8,14,15)		Veterans' (12,13)	Pediatrics (2,3)	Total (1-15)
Patient Care Ward Administration Personnel Administration	76.22 10.21 12.48	79 .30 11.2 8 8 . 59	72.07 18.98 8.07	72.94 12.89 13.20	75.60 9.79 13.65	75.90 12.62 10.56
Total2	100.00	100.00	100.00	100.00	100.00	100.00

¹ Duration and Time expressed in Intervals of 15 seconds.

² Total includes 225 other activities amounting to 267 intervals.

F-5.	Activities	by Level	of	Activity	for	Each	Ward	Status

		Wan	d St	atus		
Level of Activity	Private	Semi-Private	Public	Veterans'	Pediatrics	Total
	(9,10,11)	(4,7,8,14,15)	(1,5,6)	(12,13)	(2,3)	(1-15)
	265	226			- 01	00-
Management	165	306	175	111	124	881
Supervision .	460	866	535	222	346	2,429
Direction	223	353	196	85	113	970
Education	94	146	65	24	37	366
Execution	(1,876)	(3,153)	(1,944)	(1,093)	(1,091)	(9,157)
Direct	973	1,337	893	433	416	4,052
Admin. & Clerical	903	1,816	1,051	660	675	5,105
Other	(57)	(65)	(42)	(31)	(30)	(225)
In Transit	56	63	40	31	29	219
Personal	1	2	2	_	ĺ	6
Total	2,875	4,889	2,957	1,566	1,741	14,028

F-6. Time Involved* in Activities by Level of Activity for Each Ward Status

		Wan	d St	atus		
Level of Activity	Private (9,10,11)	Semi-Private (4,7,8,14,15)	Public (1,5,6)	Veterans' (12,13)	Pediatrics (2,3)	Total (1-15)
Management Supervision Direction Education Execution Direct Admin. & Clerical Other In Transit Personal	373 887 318 282 (3,837) 1,909 1,928 (63) 61	759 1,665 483 308 (6,306) 2,597 3,709 (79) 74 5	482 982 258 121 (3,866) 1,701 2,165 (51) 41	265 572 132 301 (2,533) 1,026 1,507 (37) 37	440 670 149 277 (2,267) 759 1,508 (37) 33 4	2,319 4,776 1,340 1,289 (18,809) 7,992 10,817 (267) 246 21
Total	5,760	9,600	5,760	3,840	3,840	28,800

F-7. Percent Time Involved in Activities by Level of Activity for Each Ward Status

		77 -	. 3 . 0 . +				
	Ward Status						
Level of Activity	Private	Semi-Private	Public	Veterans'	Pediatrics	Total	
	(9,10,11)	(4,7,8,14,15)	(1,5,6)	(12,13)	(2,3)	(1-15)	
Management	6.48	7.91	8.37	6.90	11.46	8.05	
Supervision	15.40	17.34	17.05	14.90	17.45	16.58	
Direction	5.52	5.03	4.48	3.44	3.88	4.65	
Education	4.90	3.21	2.10	7.84	7.21	4.48	
Execution	(66.61)	(65.69)	(67.12)	(65.96)	(59.04)	(65.31)	
Direct	33.14	27.05	29.53	26.72	19.77	27.75	
Admin. & Clerical	33.47	38.64	37.59	39.24	39.27	37.56	
Other	(1.09)	(0.82)	(0.89)	(0.96)	(0.96)	(0.93)	
In Transit	1.06	0.77	0.71	0.96	0.86	0.85	
Personal	0.03	0.05	0.17	-	0.10	0.07	
Total	100.00	100.00	100.00	100.00	100.00	100.00	

^{*} Time expressed in Intervals of 15 seconds.

F-8. Number and Duration of Activities by Type of Ward

Type of Ward	Ward Nos.	No. Activities	Duration ¹ Total	(Intervals) Mean
Medical Surgical Mixed Med. & Surg. Veterans Children's Total	5,9,14 1,4,6,7,8,15 10,11 12,13 2,3 1-15	2,981 5,823 1,917 1,566 1,741	5,760 11,520 3,840 3,840 3,840 28,800	1.93 1.98 2.00 2.45 2.21

F-9. Activities by Area of Activity for Each Type of Ward

		Type of Ward					
Area of Activity	Medical	Surgical	Mixed Med. &	Veterans'	Children's	Total	
	(5,9,14)	(1,4,6,7,8,15)	Surg. (10,11)	(12,13)	(2,3)	(1-15)	
					(-)5/	(//	
Patient Care	2,249	4,281	1,416	1,152	1,350	10,448	
Ward Administration	455	926	221	236	207	2,045	
Personnel Administration		535	5/1/4	147	154	1,310	
Tota 1 ²	2,981	5,823	1,917	1,566	1,741	14,028	

F-10. Time Involved in Activities by Area of Activity for Each Type of Ward

		Тур				
Area of Activity	Medical	Surgical	Mixed Med. &	Veterans'	Children's	Total
			Surg.			
	(5,9,14)	(1,4,6,7,8,15)	(10,11)	(12,13)	(2,3)	(1-15)
Patient Care	4,534	8,663	2,957	2,801 495	2,903	21,858
Ward Administration	736	1,675	353	495	376	3,635
Personnel Administration	436	1,083	490	507	524	3,040
Tota 12	5,760	11,520	3,840	3,840	3,840	28,800

F-11. Percent Time Involved in Activities by Area of Activity for Each Type of Ward

		Тур				
Area of Activity	Medical	Surgical	Mixed Med. &	Veterans'	Children's	Total
	(5,9,14)	(1,4,6,7,8,15)	Surg. (10,11)	(12,13)	(2,3)	(1-15)
Patient Care Ward Administration Personnel Administration	78.72 12.78 7.57	75.20 14.54 9.40	77.01 9.19 12.76	72.94 12.89 13.20	75.60 9.79 13.65	75.90 12.62 10.56
Tota 12		100.00	100.00	100.00	100.00	100.00

¹ Duration and Time expressed in Intervals of 15 seconds.

² Total includes 225 other activities amounting to 267 intervals.

F-12. Activities by Level of Activity for Each Type of Ward

		Тур	e of Wa	c d.		
Level of Activity	Medical	Surgical	Mixed Med. &	Veterans'	Children's	Total
	(5,9,14)	(1,4,6,7,8,15)	Surg. (10,11)	(12,13)	(2,3)	(1-15)
Management	178	374	94	111	124	881
Supervision	469	1,068	324	555	346	2,429
Direction	205	429	138	85	113	970
Education	94	153	58	24	37	366
Execution	(1,988)	(3,718)	(1,267)	(1,093)	(1,091)	(9,157)
Direct	895	1,642	666	433	416	4,052
Admin. & Clerical	1,093	2,076	601	660	675	5,105
Other	(47)	(81)	(36)	(31)	(30)	(225)
In Transit	46	77	36	31	29	219
Personal	1	4	-	-	1	6
Total	2,981	5,823	1,917	1,566	1,741	14,028

F-13. Time Involved* in Activities by Level of Activity for Each Type of Ward

		Тур	e of Wa:	r d		
Level of Activity	Medical	Surgical	Mixed Med. &	Veterans'	Children's	Total
	(5,9,14)	(1,4,6,7,8,15)	Surg. (10,11)	(12,13)	(2,3)	(1-15)
Management Supervision Direction Education Execution Direct Admin. & Clerical Other In Transit Personal	396 886 282 215 (3,927) 1,629 2,298 (54) 52	1,016 2,032 577 312 (7,484) 3,216 4,268 (99) 84	202 616 200 184 (2,598) 1,362 1,236 (40)	265 572 132 301 (2,533) 1,026 1,507 (37) 37	440 670 149 277 (2,267) 759 1,508 (37) 33 4	2,319 4,776 1,340 1,289 (18,809) 7,992 10,817 (267) 246
Total	5,760	11,520	3,840	3,840	3,840	28,800

F-14. Percent Time Involved in Activities by Level of Activity for Each Type of Ward

		Тур	e of Wa:	r d		
Level of Activity	Medical	Surgical	Mixed Med. &	Veterans'	Children's	Total
	(5,9,14)	(1,4,6,7,8,15)	Surg. (10,11)	(12,13)	(2,3)	(1-15)
Management	6.87	8.82	5.26	6.90	11.46	8.05
Supervision Direction	15.38	17.64	16.04	14.90 3.44	17.45	16.58
Education	3.73	2.71	4.79	7.84	7.21	4.48
Execution	(68.18)	(64.97)	(67.66)	(65.96)	(59.04)	(65.31)
Direct Admin. & Clerical	28.28	27.92 37.05	35.47 32.19	26.72 39.24	19.77	27.75 37.56
Other	(0.93)	(0.86)	(1.04)	(0.96)	(0.96)	(0.92)
In Transit	0.90	0.73	1.04	0.96	0.86	0.85
Personal	0.03	0.13	-	-	0.10	0.07
Total	99.99	100.01	100.00	100.00	100.00	99.99

^{*} Time expressed in Intervals of 15 seconds.

F-15. Number and Duration of Activities by Sex of Ward Patients

Sex of Ward Patie	nts Ward Nos.	No. Activities	Duration Total	(Intervals)
Male Female Both Sexes Children	6,12,13,14,15 1,4,7,8 5,9,10,11 2,3	4,458 3,931 3,898 1,741	9,600 7,680 7,680 3,840	2.15 1.95 1,97 2.21
Total	1-15	14,028	28,800	2.05

F-16. Activities by Area of Activity and Sex of Ward Patients

	Sex of Ward Patients				
Area of Activity	Male (6,12,13,14,15)	Female (1,4,7,8)	Both Sexes (5,9,10,11)	Children (2,3)	Total (1-15)
Patient Care Ward Administration Personnel Administration	3,265 734 376	2,960 554 372	2,873 550 408	1,350 207 154	10,448 2,045 1,310
Total ²	4,458	3,931	3,898	1,741	14,028

F-17. Time Involved in Activities by Area of Activity and Sex of Ward Patients

	Sex of Ward Patients				
Area of Activity	Male (6,12,13,14,15)	Female (1,4,7,8)	Both Sexes (5,9,10,11)	Children (2,3)	Total (1-15)
Patient Care Ward Administration Personnel Administration	7,010 1,488 999	6,024 893 7 09	5,921 878 808	2,903 376 524	21,858 3,635 3,040
Tota 12	9,600	7,680	7,680	3,840	28,800

F-18. Percent Time Involved in Activities by Area of Activity for Each Sex Type of Ward

	S	ex of Ward	Patients		
Area of Activity	Male (6,12,13,14,15)	Female (1,4,7,8)	Both Sexes (5,9,10,11)	Children (2,3)	Total (1-15)
Patient Care Ward Administration Personnel Administration	73.02 15.50 10.11	78.44 11.63 9.23	77.10 11.43 10.52	75.60 9.79 13.65	75.90 12.62 10.56
Tota 12	100.00	100.00	100.00	100.00	100.00

¹ Duration and Time expressed in Intervals of 15 seconds.

² Total includes 225 other activities amounting to 267 intervals.

F-19. Activities by Level of Activity and Sex of Ward Patients

	S	ex of Ward	Patients		
Level of Activity	Male	Female	Both Sexes	Children	Total
	(6,12,13,14,15)	(1,4,7,8)	(5,9,10,11)	(2,3)	(1-15)
Management	275	272	210	124	881
Supervision	690	747	646	346	2,429
Direction	262	316	279	113	970
Education	126	87	116	37	366
Execution	(3,022)	(2,464)	(2,580)	(1,091)	(9,157)
Direct	1,331	1,022	1,283	416	4,052
Admin. & Clerical	1,691	1,442	1,297	675	5,105
Other	(83)	(45)	(67)	(30)	(225)
In Transit	81	43	66	29	219
Personal	2	2	1	ı	6
Total	4,458	3,931	3,898	1,741	14,028

F-20. Time Involved* in Activities by Level of Activity and Sex of Ward Patients

	S	ex of Ward	Patients		
Level of Activity	Male	Female	Both Sexes	Children	Total
	(6,12,13,14,15)	(1,4,7,8)	(5,9,10,11)	(2,3)	(1-15)
Management Supervision Direction Education Execution Direct Admin. & Clerical Other In Transit	690 1,415 383 505 (6,504) 2,898 3,606 (103)	724 1,467 420 182 (4,833) 1,871 2,962 (54) 46	465 1,224 388 325 (5,205) 2,464 2,741 (73)	440 670 149 277 (2,267) 759 1,508 (37)	2,319 4,776 1,340 1,289 (18,809) 7,992 10,817 (267)
Personal	7	8	2	33 1 ₄	246 21
Total	9,600	7,680	7,680	3,840	28,800

F-21. Percent Time Involved in Activities by Level of Activity for Each Sex Type of Ward

	S	ex of Ward	Patients		
Level of Activity	Male	Female	Both Sexes	Children	Total
	(6,12,13,14,15)	(1,4,7,8)	(5,9,10,11)	(2,3)	(1-15)
Management	7.10	0 1.0	6.05	22.15	0
	7.19	9.43	6.05	11.45	8.05
Supervision	14.74	19.10	15.94	17.45	16.58
Direction	3.99	5.47	5.05	3.88	4.65
Education	5.26	2.37	4.23	7.21	4.48
Execution	(67.75)	(62.93)	(67.77)	(59.03)	(65.31)
Direct	30.19	24.36	32.08	19.77	27.75
Admin. & Clerical	37.56	38.57	35.69	39.27	37.56
Other	(1.07)	(0.70)	(0.95)	(0.96)	(0.92)
In Transit	1.00	0.60	0.92	0.86	0.85
Personal	0.07	0.10	0.03	0.10	0.07
Total	100.00	100.00	9 9.99	99.99	99.99

^{*} Time expressed in Intervals of 15 seconds.

F-22. Number and Duration of Activities by Nurse Status of Ward

Nurse Status of Ward		No.	Duration	(Intervals)
	Ward Nos.	Activities	Total	Mean
Graduate Nurse Wards	12-15	3,511	7,680	2.01
Other Wards	1-11	10,517	21,120	2.19
Total	1-15	14,028	28,800	2.05

F-23. Activities by Area of Activity and Nurse Status of Ward

	Nurse Status of		
Area of Activity	Graduate Nurse Wards (12-15)	Other Wards (1-11)	Total (1-15)
Patient Care Ward Administration Personnel Administration	2,638 525 288	7,810 1,520 1,022	10,448 2,045 1,310
То	$t a 1^2$ 3,511	10,517	14,028

F-24. Time Involved in Activities by Area of Activity and Nurse Status of Ward

	Nurse Status of		
Area of Activity	Graduate Nurse Wards (12-15)	Other Wards (1-11)	Total (1-15)
	(1- 4)	(= ==/	(/)
Patient Care	5,797	16,061	21,858
Ward Administration	977	2,658	3,635
Personnel Administration	832	2,208	3,040
To	ta 1 ² 7,680	21,120	28,800

F-25. Percent Time Involved in Activities by Area of Activity and Nurse Status of Ward

	Nurse Status of		
Area of Activity	Graduate Nurse Wards (12-15)	Other Wards (1-11)	Total (1-15)
Patient Care Ward Administration Personnel Administration	75.48 12.72 10.83	76.05 12.59 10.45	75.90 12.62 10.56
1	t a 1 ² 100.00	100.00	100.00

¹ Duration and Time expressed in Intervals of 15 seconds.

² Total includes 225 other activities amounting to 267 intervals.

F-26. Activities by Level of Activity and Nurse Status of Ward

	Nurse Status o	f Ward	
Level of Activity	Graduate Nurse Wards		Total
	(12-15)	(1-11)	(1-15)
Mana and	223	650	881
Management	231	650	
Supervision	515	1,914	2,429
Direction	208	762	970
Education	98	268	366
Execution	(2,399)	(6,758)	(9,157)
Direct	1,016	3,036	4,052
Admin. & Clerical	1,383	3,722	5,105
Other	(60)	(165)	(225)
In Transit	59	160	219
Personal	1	5	6
Total	3,511	10,517	14,028

F-27. Time Involved* in Activities by Level of Activity and Nurse
Status of Ward

	Nurse Status o	f Ward	
Level of Activity	Graduate Nurse Wards		
	(12-15)	(1-11)	(1-15)
Management	571	1,748	2,319
Supervision	1,105	3,671	4,776
Direction	309	1,031	1,340
Education	453	836	1,289
Execution	(5,168)	(13,641)	(18,809)
Direct	2,226	5,766	7,992
Admin. & Clerical	2,942	7,875	10,817
Other	(74)	(193)	(267)
In Transit	73	173	246
Personal	1	20	21
Total	7,680	21,120	28,800

F-28. Percent Time Involved in Activities by Level of Activity and
Nurse Status of Ward

	Nurse Status of Ward		
Level of Activity	Graduate Nurse Wards	Other Wards	Total
	(12-15)	(1-11	(1-15)
Management	7.43	8.28	8.05
Supervision	14.39		
		17.38	16.58
Direction	4.02	4.88	4.65
Education	5.90	3.96	4.48
Execution	(67.29)	(64.59)	(65.31)
Direct	28.98	27.30	27.75
Admin. & Clerical	38,31	37.29	37.56
Other	(0.96)	(0.91)	(0.93)
In Transit	0.95	0.82	0.85
Personal	0.01	0.09	0.07
Total	99.99	100.00	99.99

^{*} Time expressed in Intervals of 15 seconds.

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Research Division, Department of National Health and Welfare

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- * Memorandum No. 2. Old Age Income Security in New Zealand.

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^{*} Available on request.

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O In Preparation.









